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ABSTRACT

A three-year project was conducted to develop a competency-based college major aimed at preparing contemporary nurses, both basic preservice and degree completion R.N.'s to deliver family-centered care in acute settings or community health settings. The competency-based major was developed using a conceptual framework that introduces family-centered care in the sophomore year, episodic nursing at the junior level (pscho-biological stress episodes), and application of preventative health concepts included in distributive nursing at the senior level. Faculty identified the family-centered, episodic, and distributive nursing competencies for which nurses need to be prepared, designed behavioral objectives for each course and competencies for each learning module as well as learning modes and performance criteria. Evaluation measures were formulated and instructional media for the autotutorial modules were purchased or produced at the college to support mastery of these competencies. A Health Instruction Center was established to further implement the autotutorial mastery approaches to learning. Appendixes contain competencies to be mastered each year, course sequence for the nursing major, study guides, and position descriptions for personnel needed for staffing the program. (KC)

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Department of Health, Education, And Welfare
Nursing Special Project Grants Program
Final Report: # 1. DIO NU O 2127-01

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Competency-Based Major For Nurse's
Expanding Role

By
Noreen C. O'Neill, Project Director
Madonna College
Department of Nursing
Livonia, Michigan

July 1, 1980

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FINAL REPORT FOR TRAINING GRANT

PART A Basic Information

I.D. Number: 1. D10 Nu 02127-01

Title: Competency-Based Major For Nurse's Expanding Role

Institution: Madonna College, Livonia, Michigan

Project Director: Noreen C. O'Neill, M.S.N., Ph.D. (candidate)

Director of the Health Instruction Center:	Dr. Patricia Vint
Competency Coordinators:	Sr. Cecilia Eagen, Ph.D. (candidate) Olivian DeSouza, M.S.N. Janet Wolf, M.P.H.
Practice Laboratory Facilitator:	Sr. Giovanni Monge, R.N., BA
Clerical and Technical Assistants:	Mary Quintel Barbara Tucker

Years Approved: 3 years

Period Covered: 4-1-77 through 3-31-80

Date of Report: June 30, 1980

PART B Purpose of Project

The purpose of this project is to develop a competency-based major which aims at preparing contemporary nurses, both basic pre-service and degree completion R.N.s, to deliver family-centered care in acute settings or community health settings thus allowing them to function in extended roles in clinics, schools, industry, home care coordinating agencies, health maintenance organizations, hospitals and health centers. The competency-based major has been developed using a conceptual framework that introduces family-centered care at the sophomore year, Episodic Nursing at the junior level (psycho-biological stress episodes), and application of preventive health concepts included in Distributive Nursing at the senior level. Faculty identified the Family-Centered, Episodic and Distributive Nursing competencies for which nurses need to be prepared, they designed behavioral objectives for each course and competencies for each learning module as well as learning modes and performance criteria. Evaluation measures were formulated and instructional media for the autotutorial modules were purchased or produced at the College to support mastery of these competencies. A Health Instruction Center was established to further implement the autotutorial mastery approaches to learning.

PART C

The following eight project objectives were identified as goals for this grant.

Objective #1: Design year-end competencies for:

- a. Family-Centered Nursing-Sophomore year.
- b. Episodic Nursing-Junior year.
- c. Distributive Nursing-Senior year.

Faculty began designing this precise curriculum in Academic Year 1974-75 by creating a philosophy of nursing and a conceptual framework that facilitated the education of contemporary nurses (pre-service basic students and career mobility R.N.s) to be technically skilled in classic and emerging professional functions, oriented in Community Health needs assessment and prevention of illness, assessed to be self-directed problem-solvers, and wise change agents. The curriculum and strategies were selected to promote gradual independence and critical thinking so that the nurse professional could go "Beyond the Information Given"¹ to form new understanding and expand her functions as the client's health or nursing needs were manifested.

Considering major health problems and other complex emerging trends in our society and the profession, nursing faculty used that Conceptual Framework to organize appropriate nursing content for each year of the curriculum. Terminal expectations were cited as "year-end competencies". Faculty wrote these in behavioral terms, correlated them with course objectives and designed learning experiences in each autotutorial module to exercise the students in the behaviors. Finally, a year-end competency exam (written and practical) promised synthesis of content and provided additional validation of attainment of Mastery. Where students proved deficient, remediation was prescribed and repeat testing was done before advancement to the next year.

The appendix A shows terminal behaviors expected of Madonna Nursing Graduates.

The appendix B shows year-end competencies as they appear in the Nursing Handbook.

Objective #2: To develop terminal behaviors for specific courses:

Besides the general studies requirement, including a natural science minor, the nursing students at Madonna College are to demonstrate successful completion of 51 nursing credits. This is translated into 4 courses at each level. The first course at each level is a core or themes course which is required of basic students and R.N.s.

NUR 200 Nursing Process

NUR 310 Crisis Intervention Nursing Core

NUR 410 Introduction to Distributive Nursing

See appendix C for the total curriculum's sequence of courses.

Following pursuit of these, students may progress through the three following courses that year in which ever sequence they desire

Sophomore: Family Centered Nursing I, II, III. (NUR 210, 295, 296)

Junior: Episodic Nursing I, II, III. (NUR 347, 365, 366)

Senior: Distributive Nursing I, II, III. (NUR 430, 462, 485)

1.

Bruner, Jerome S. #Beyond the Information Given, W.W. Norton and Company, Inc. N.Y. 1

These courses have been standardized by construction of Competency-based, Autotutorial Modules that precisely state behavioral objectives, discovery mode questions to develop content to be mastered, and correlated learning activities (print and non-print resources and clinical experiences) to be accomplished in one week's length of time.

Weekly Mastery tests aid the faculty in determining if minimal competency (80%) has been achieved, or if remediation and retesting must be prescribed.

Year-end exams replaced final exams in an effort to emphasize synthesis—regardless of sequence of courses. The four courses then were to be seen as a total entity by the end of April. Faculty appreciate that view, but course-end summative exams are being considered again to help reinforce synthesis and forestall rote memory and compartmentalizing of information in the individual courses.

In the second interim report, extensive tables presented the year-end competencies and conceptual framework themes and excerpts from course objectives that demonstrated how the course objective implement the conceptual framework themes.

Objective #3: To assign course content and appropriate learning experiences:

This grant was sought to help faculty design a nursing major that would be responsive to the needs of the various publics to be served by the College and its graduates.

Faculty wished to plan a futuristic curriculum that would provide professional nurses for a society characterized by rapid change, medico-technological advances, and rising health costs. The faculty planned a strong major that responds to a variety of voices from:

Newly employed graduates who needed to have less "reality shock" by feeling more secure in the practice of nursing's psychomotor skills;

Nursing directors who called for more acute care competency in the beginning baccalaureate nurse;

Nursing educators who wanted preparation for a more collegial, cooperative professional practice, especially when considering nursing's expanding roles;

Madonna College administrators who felt a competency-based format for all academic departments would insure accountability;

Department chairperson who wished to stabilize content and increase critical thinking skills through use of self-paced mastery modules;

Faculty who wish to teach and role-model in areas for which they had special knowledge.

1. Sophomore year: All these factors helped shape the rationale for the nursing major.
The major begins in Term III (Spring) of the Freshman year.
NUR 200 - Nursing Process is a foundational course that teaches the nursing process as scientific methodology for professional nursing with special emphasis on the assessment component. The basic themes integrating the curriculum and especially those theorists whose work underpin mastery of sophomore level Family-Centered nursing, are presented. All Registered Nursing students are obligated to take this course but may take it totally self-paced or attend weekly Classroom Discussion Groups.

Beginning in September, for a ten-week period, all basic students apply the nursing process in a hospital setting with clients who are appropriate for sophomore students in their first clinical laboratory. This course is NUR 210, Family-Centered Nursing I. Special emphasis is on the nursing intervention aspect of the nursing process. Sixty sophomores are divided between four full time faculty who guide the small assembly sessions. Two part-time faculty assist in clinical teaching so the faculty - student ratio is 1:10 in the laboratory and 1:15 in the class discussions.

In the second 10 week period from November to early February, the faculty remain with their same ten students but move into areas of their particular family-oriented expertise.

Two full time and one part-time maternity faculty are responsible for NUR 295, (Family Centered Nursing II). Students deal with the newborn and parents from the viewpoint that beginning a family and parenting is a normal phenomenon, but one which can demand the support of a professional nurse in an institutional setting.

During the course of NUR 296 Family Centered Nursing III the pediatric nursing specialists of the sophomore faculty team, two full time and one part-time, stay with the ten students they had in NUR 210 but now apply the nursing process to families in the child-rearing stage; those that are experiencing the more common health problems associated with children and families in the early development period.

In the third 10 week period, February through April, the students change faculty members and master the alternate course in the sophomore sequence.

The sophomore sequencing of course content insures that: Content themes and prerequisite skills are learned by all sophomores at the beginning of the sequence (NUR 200, 210) and are reinforced throughout the year regardless of which aspect of the evolving family they approach first (NUR 295-296).

Sophomore assignment to family nursing builds on what students know from their own life experiences at home, and from their freshman year where they studied commonalities in man's nature; and involves the affective learning domain by promoting a high level of anticipation, enthusiasm and motivation.

Student anxiety related to clinical assignments is reduced. Orientation and adjustment takes place before sophomores begin clinical labs in what once were considered maternal-child specialty areas.

Faculty satisfaction and benefits to students are realized by having faculty teach and supervise in areas they consider their specialties.

Competency-based objectives are realized when mastery of fundamental interventions are spread over the total year. Certain experiences such as comfort measures, asepsis, intrusive therapies, and drug administration can be gained and reinforced in a variety of nursing settings, with clients at any age level.

Sophomore year provides the essential nursing substructure for crisis intervention with family members experiencing psycho-biological stress regardless of age.

Registered nurses coming from Associate degree programs in nursing and having basic courses in Fundamentals and Maternal-Child health, transfer equivalent sophomore level credits. The diploma graduate and the Associate Degree Nurse with integrated pediatric content (as in child-adult or acute nursing) write a challenge exam with both written and clinical components to validate sophomore level competency. Because P.N.s may transfer in sophomore credit and/or challenge 200, 300 level nursing, the baccalaureate emphasis is reinforced for basic and R.N. degree completion students in the upper division. Problems are assessed with the age continuum in mind.

In NUR 462 and 485 at the senior level, the family assessment and follow-up care of the newborns in the home is a programmed spiraling of Family-centered nursing into upper division nursing. In NUR 462 chronic health problems are addressed more in depth: Teenage pregnancy, Cerebral Palsy, and Alcoholism are some modules that reinforce baccalaureate Parent-Child Health principles.

2. Junior year:

All juniors must begin the year by taking the core course, NUR 310, Crisis Intervention Nursing Core. Certain objectives are met in NUR 310 to insure mastery of junior level competencies regardless of which internal rotation of courses (NUR 347, 365, 366) is selected by the student, or if medical/surgical, psychiatric nursing is to be challenged by the registered nurses.

"The intent of this course is to build upon previous nursing knowledge and to learn new skills in the delivery of care to the client who is experiencing a psychophysiological trauma. The student will discover that crises are treatable, subject to a problem solving approach. Second, that regardless of the setting, nurses can be prepared to care for patients by assisting those patients to deal with the crises before it creates or adds to problems in mental health. And third, that factors such as growth and development, socio-cultural background, adaptive mechanisms, homeostatic conditions, all play a role in how one perceives and responds to crises."²

Appendix D shows the study guides used by R.N.s prior to challenging Episodic Nursing I, II, and III. They will provide an excellent overview of the junior level courses.

R.N.s may take NUR 310 self-paced in whichever term they select prior to challenging 300 level nursing courses. Registered nurses and basic junior students concurrently pursue BIO 371, Pathophysiology as a science that supports the major's upper division courses in Episodic nursing.

3. Senior year:

In this particular leveling of course content, the curriculum designers believe that they are presenting an excellent base upon which to build progressively more complex and independent nursing practice. The senior student is expected to function as a colleague and/or leader in hospitals, community health agencies and even in the expanding functions of professional nursing. To successfully "distribute" what she knows to the public about disease prevention, health promotion, nursing care during chronic illness, rehabilitation (primary, secondary and tertiary health needs), she must build on the holistic approach to the patient undergoing psychobiological stress learned as a junior.

All basic students and registered nurses are obligated to the core course NUR 410, as well as all subsequent Distributive Nursing Courses, and the support course, BIO 360, Epidemiology.

Self-paced study for NUR 410, Introduction to Distributive Nursing is optional over Summer Session. The course discussions and testing is scheduled at the beginning of each year or before the first of the 400-level nursing course and is pursued because it presents the instructional themes for the year which must be applied regardless of the clinical placement.

Students in NUR 430 functioning in leadership settings will be guided in applying:

- a. Nursing process applied to groups of clients in institutional settings.
- b. Group process and Interpersonal Relationships
- c. Teaching-learning process for adult groups
- d. Quality assurance and accountability
- e. Health Care delivery systems
- f. Change agent concepts
- g. Management and Budgeting
- h. Use of power, and leadership style
- i. Legal aspects of Nursing

Students in NUR 462 emphasize the family as client and deal with examples of the nurses in expanding roles. The description of the course is as follows:

"Family-Centered Community Health Nursing is designed to provide the student with the opportunity to apply previously learned knowledge and skills in a community setting to promote optimum health in families with complex needs. The basic focus is on the family as the unit of service. Assessments of the family as a group are made,

chronic family health problems are diagnosed, an approach to the problem is worked out jointly by the family and the nurse, and its effects on family health are evaluated. The goal is to help the family to change so that it can grow in its ability to meet its needs through self-care and to fulfill its function in more healthful ways. The student will do an indepth analysis of the family as the basic unit of service through completing a family case study. Trends and issues will be presented to broaden the student's perspective of community health nursing. The student will develop a critical awareness of some of the newer roles taken by nurses through investigating the nurse in an expanded role. Emphasis is also placed on exploring the influence of health values/behavior and culture on health and illness, disease control, and chronic health problems through the life cycle. The student will investigate available community resources related to different cultural groups and chronic social/health problems. Supervised clinical practice provides the student with interdisciplinary experiences in which she assists families to cope with health issues and to improve health services..."

In NUR 485 students view the community as client and conduct extensive area studies to assess community health resources and develop beginning skills in identifying political, economic, social, and environmental problems that hinder the delivery of Health Care services. They implement a change project as a result of that data collection and analysis. Students also investigate the health needs of the elderly, school, and work population, critically discuss their current and future needs and suggest how nursing can affect the health of these groups. These students are also able to describe components of the health care system; analyze the effectiveness of each in improving the health of the population and contrast/compare the many proposals for improving health care in the United States. They identify political factors and organizations that shape and influence health care delivery. The # 2 Module in NUR 485 dealing with school and employee health is a sample of how clinical assignments are used in developing theory.

Other Faculty members, such as those in NUR 430, state the clinical assignment in the "Activities" column of the individual modules and then summarize those assignments into a clinical behavioral check list to grade clinical performance.

Objective #4: To establish appropriate clinical facilities.

Finding appropriate clinical facilities is a responsibility shared by the Chairperson and the competency coordinators for each clinical year. Visits to perspective sites are made as a "team" and annual contracts are negotiated for specific agencies and specific units. Observational or one day experiences are arranged at the course level. Currently contracts exist with seven Acute Care Agencies, two city health departments, and two agencies of the Visiting Nurses Association. Students in NUR 485 use Madonna College as their base of operation for their area study and experiences with geriatric, school and industrial health.

Original enthusiasm for semester assignments at Home Care Agencies has wained based on faculty reports that documentation for third party payment includes

only technical "hands on" type intervention. Carrying clients with needs for teaching-counselling and other support type interventions (i.e. preventive aspects for health maintenance) is not encouraged so the department felt the course objectives for comprehensive nursing in NUR 462 could not be met in those sites.

The Health Instruction Center also is a "Clinical" facility that provides students with the opportunity to learn and improve technical skills. However, this resource will be discussed in full in the subsequent remarks on "Impact" (Part E).

Objective #5: To incorporate self-paced learning into the over-all scheme of terminal competencies.

When this grant was conceived, the project director was determined to produce strategies that supported a humanistic philosophy. Namely, students are unique individuals to be respected for their worth, individuals free to make choice/decisions for their own growth. The autotutorial modules set parameters for students in which they are free to make responsible choices. They know precisely what is expected of them. The module format develops content using J. Bruner's discovery mode of learning--posing provocative questions. The students set up the time and place to study and master the prescribed media. Then the strategies provide for the best of both educational worlds by scheduling group dialogues with faculty role models who clarify and validate perceptions gained through self-study (See Autotutorial Approaches in Nursing Education by Crystal Lange for overview of logistics).

When faculty hammered out their conceptual framework and threads, they decided which concepts would be taught at which level. They formulated the year-end competency statements and then designed modules to guide students through the print and non-print media, clinical experiences and related activities that would help students independently master the stated course objectives, which in turn assisted students to meet year-end competency. The stated year-end competencies were not identical with the individual competency statement or learning goal which heads each module, nor were they a reiteration of learning objectives in the four courses. Rather, competencies are a synthesis of terminal goals the faculty envision for students at the end of each school year.

Competency Coordinators worked with Course Facilitators (See Position Description-Appendix E) and all faculty assigned to teach at the specific level so as to document which courses and activities exercised the student in which specific competency. They also designed their year-end summative exams from the competency statements, yet still identified which course the test item was assessing. At the last faculty Colloquy (May 6, 9, 16, 1980) the topic of year-end testing was discussed. Faculty have likewise grown in their skill at designing comprehensive exams and now propose to more extensively use situational items that cross-over the component parts of the yearly nursing concentration (i.e. Family-centered nursing being Fundamentals, Pediatrics and Maternity or Episodic nursing being Psychiatric, Medical and Surgical nursing). Their year-end exam assess problem solving skills from simulations that will remain multi-faceted but not labeled from a specific course in the year being tested. Anxiety in students was

noted and it was worried that faculty were socializing new nurses unnecessarily into stress situations. While they believed formative weekly exams were fine, final exams in each course should be reintroduced to facilitate synthesis. It was agreed that weekly tests, while greatly approved by student, might tend to compartmentalize information. Faculty hypothesize that course-end final exams would be one earlier step promoting synthesis prior to the "summative" year-end competency exam.

In NUR 200, Registered Nurses returning to school experience the Auto-tutorial Modules with apprehension.

Independence is facilitated, encouraged and expected. There is an adjustment required when adult Registered Nurse learners are asked to be more actively engaged in the learning process. Weekly Mastery at 80% level minimum achievement is intellectually accepted by them. However, many student (basics as well as R.N.s) protest the modified application of John Carroll's "Aptitude Criteria" as being too severe: If 40% of the total course content tested has been achieved at less than the 80% level the student is asked to resign for not demonstrating the level of aptitude prescribed in this Baccalaureate program. In an evaluative research project currently being conducted by the Departmental Chairperson (also Project director) for a doctoral dissertation, Senior students were surveyed on all aspects of the strategies used. Overwhelmingly rejected was this policy of dismissal for inaptitude. Faculty have seen merit in its application because it objectively screens those technicians not suited to baccalaureate degree goals. They voted to retain it while citing the policy of "extenuating circumstances" (review of dismissal by forum of Nursing faculty and students) as providing a vehicle for exceptions without favoritism.

Self-paced work for Registered Nurses in NUR 200 can be student paced or teacher paced. The latter while optional, is encouraged in this first nursing course as there is a need to dialogue with their professor about implications of professionalizing an occupation; moving from directed, task centered approach to being an autonomous, self-directed, problem solver in Nursing. New skills are introduced in this core course that require on-campus activity notably physical assessment with return demonstrations on peers in our Health Instruction Center and televised role-playing in interviewing skills and health teaching. Independent module testing in the Health Instruction Center is permitted.

In NUR 310, section 2, the instructor has an introductory session with all who registered for the self-paced section. She sets up the guide lines for this theme course. Because many Registered Nurses working full time tend to procrastinate until the end of term to complete all modules and testing and therefore putting a great burden on the faculty member(s) assigned to these students, the faculty member required one test done by October, another in November and the last in December.

Basic students in NUR 310, section 1 (group, teacher-paced) now will take it in May, meeting for Small Assembly Session and testing one time weekly for four sessions.

All senior students with a reserved rotation from September-April may procure the NUR 410 modules and avail themselves of the Health Instruction Center and Library during the summer so that they are prepared to dialogue with the faculty prior to mastery testing during the first week of school when the significant themes of the year are presented.

Now that competencies are designated and tested; and each course has been modularized with related Mastery tests developed, and unique lectures preserved on audio or video cassettes, Madonna experiences a great freedom to plan for out-reach programs for Registered Nurses intent on getting their B.S.N. or do Continuing Education topics in those areas modularized or engaging in accelerated programs for post degree; second career persons.

Objective #6: To establish interdisciplinary dialogue.

- A. A major activity in interdisciplinary dialogue was the infusion of alcoholism education into various nursing courses. As special project director of the Alcohol Education Program at Madonna College, Wayne Isbell worked intimately with the Nursing Program Chairperson and her three Competency Coordinators. All engaged in dialogue with agency representatives involved with Alcohol Education, Abuse and Rehabilitation. The conceptual framework dictated the placement of content required modules to be designed using established competency based strategies. Three modules were written using the proposed areas as outlined in the Minutes of July 25, 1979:

A. FAMILY CENTERED NURSING -- (NUR 295)

It was felt that the key theme at this level should be assessment of drinking problems which are likely to result in obstetrical-pediatric difficulties. More specifically, the techniques in taking an accurate drinking history from mother and family are to be addressed. The reasons why particular care must be taken to establish levels of alcohol ingestion is presented (e.g. detection of alcohol dependency, relationship of alcohol use to patient's total health and possible consequences to developing fetus). The Fetal Alcohol Syndrome is covered and the relationship of alcohol dependency and child abuse/neglect is explored. A simulated videotaped nurse/patient interview is employed.

B. EPISODIC NURSING -- (NUR 366)

The theme of assessment is continued in the context of medical-surgical and crisis intervention. Since the biomedical consequences of acute and chronic alcohol ingestion are numerous, assessment of alcohol dependence is essential when other "secondary" gastrointestinal, hepatic, or neurological conditions are presented. Alcohol involvement should be ruled "out or in" by a process of differential diagnosis. Assessment of acute withdrawal symptoms and management of withdrawal crisis is emphasized. Also emphasized are practical steps the nurse can pursue when alcohol dependence cannot be "ruled out."

C. DISTRIBUTIVE NURSING -- (NUR 462)

The assessment theme will continue within the context of the community and the family. Overall thrust of the module will be the development of a strategy for dealing with alcoholism in the family and community. The nursing role

will be presented as a vital link between the needs of the family as assessed and the resources in the community available to meet those needs. Special considerations of the politics of health care (third party payments, resources for destitute, and effectiveness of treatment resources) will be addressed. Models of intervention using the family, the courts, social agencies and industry will be presented.

D. RESEARCH

Material presented will be validated by the most current research and areas of new or continued research will be suggested.

These modules are now a permanent part of the nursing curriculum.

- B. Having content areas spelled out in modules has helped interdisciplinary dialogue in the natural and behavioral sciences. Faculty in Family-Centered nursing and Episodic Nursing (Psychiatric) depend heavily on prerequisite information taught in the Growth and Development course, therefore, annual meetings are scheduled to be sure critical areas are taught.

Episodic II and III faculty members communicate with professors in Anatomy-Physiology and especially in Pathophysiology because it is a required support course at junior level. Because Pathophysiology is primarily a service course, nursing has a strong influence on content and sequence though the course is team taught by an M.D. Pathologist and a Ph.D. Biologist.

Senior faculty annually dialogue with the Ph.D. professor who teaches Epidemiology to be sure issues critical to community health (Distributive Nursing) are sufficiently explored.

- C. A departmental ad hoc committee worked with the English Department to stabilize practices regarding style sheets for Madonna College term papers and mutually created a small booklet for student usage.
- D. Nursing Allied Health and Gerontology faculty dialogue to facilitate opportunities for nursing students to take elective credits in such courses as EMT 366 Emergency Room Intervention, NSc 333 Pharmacology, Ger. 415 Social Gerontology with majors in those disciplines, to broaden their awareness and practice as graduates.
- E. Faculty refer students to support services at Madonna and in the process dialogue with counsellors and tutors in the Career Resource Center and Center for Personalized Instruction (Remedial).

Objective #7: The three stage implementation of the competency-based nursing major.

The burden of this final report is to document that the purposes of the grant after three years have been accomplished. Thus Philosophy, Competencies, Conceptual Framework with integrating themes and 120 credit curriculum are firmly established. All twelve nursing courses in the major have been modularized and a copy of each module is included in a set of nine volumes. Print and non-print

materials, both commercially and locally produced, are catalogued and available in the Library and the Health Instruction Center.

Competency has been emphasized throughout the program.

- a.) There are terminal competencies for the department which implement the college goals.

	College	I	II	III	IV	V	VI	VII	VIII	IX	X
Goals:	Dept.	#1	#1	#1	#4	#7	#5	#8	#1	#2	#6
		2		2	5	8	3	7	2	5	1
		3		3			4	6	6	6	
				4			6	2		4	
				5				3		3	
				6				4		7	
								5			
								1			

- b.) There are year-end competencies that are met via course objectives.
(See appendix B of this report)

- c.) Each module has a competency statement that is implemented by precise enabling objectives.
(See volume 1 through 9 of Demonstration materials)

- d.) A Learning Resource Center, called the Health Instruction Center, was created to implement its futuristic competency-based major. The nursing department Health Instruction Center director (and/or her professional and clerical staff) have:

- 1.) Organized its operation after purchasing required furnishings and equipment.
- 2.) Assisted faculty as an instructional designer and located print and non-print media for each nursing specialty.
- 3.) Edited, printed, and prepared for bookstore distribution, each module for each of the 12 nursing courses.
- 4.) Oriented students to the use of the Autotutorial and Practice laboratories and facilitated their use.
- 5.) Monitored self-paced mastery testing and arranged for test security.

- 6.) Facilitated liaison between nursing faculty and the library staff especially as regards reserve shelving the reprints required by the modular approach.
- e.) The permanent presence of a Registered Nurse as the facilitator of the Health Instruction Center's practice laboratory has likewise furthered competency goals for the program. She assists in the following way:
 - a.) Cooperates with course facilitators to be sure weekly demonstration stations are set up.
 - b.) Coordinates the equitable use of practice facilities.
 - c.) Supervises students in proper procedure as demanded by the self-paced modules.
 - d.) Accepts Remedial Prescriptions from students, observes and demonstrates proper techniques, and documents competency by signing the prescription for return to the clinical instructor.
 - e.) Assists in the skills assessment portion of each level year-end competency exam.

(Appendix E presents position descriptions for both positions, namely, the Director of the Health Instruction Center and the Facilitator of its Practice Lab.)

- f.) Weekly Mastery testing was an essential aspect of Competency assessment. Multiple test items, coded to each course, module and enabling objective, have been written for each course. While waiting for computer banking, the items were divided into three equivalent tests for each module.
 - 1. Regular testing version
 - 2. Self-paced version
 - 3. Alternate version for repeat validation

They were typed, duplicated in sufficient numbers, and secured for weekly use. A computer programmer wrote a protocol, and three modules from NUR 200 were selected to test the system. The report of this is found in Appendix F. The final recommendation was to maintain the system of three printed test versions as a superior plan to the frustrations envisioned when faced with limited machine for nursing and commitments.

- g.) Registered Nurses returning to school with career mobility plans have utilized the self-paced competency modules to be more free to pursue their goals. While learning materials are demanding students can:
 - 1. program when to use the library or Health Instruction Center
 - 2. decide if they need the weekly assembly sessions
 - 3. make advantage of self-paced tests in the Health Instruction Center.

Telescoping semesters into ten weeks and knowing 5 - 9 months ahead of time which clinical days and place will be the student's, allows the R.N. to reschedule work days so they can maintain their sequentiality and still be part-time students.

All this flexibility has permitted prospective degree nurses to pursue their expanding professional roles and perform their current clinical practice with greater competency.

Objective #8 To evaluate accomplishments of the project.

Throughout the course of the grant, evaluation was considered in developing each module.

- 1.) Each module was critiqued by each student. Faculty read the remarks and made modifications in the modules for the next academic year. After using media in the Health Instruction Center, evaluation forms dealing with media and modules were required and results were influential in decision making. Samples of these responses were attached to the first interim report.
- 2.) Students, at the end of the first year of the grant, attended assemblies with the project director and she tape-recorded their suggestions for improvement and incorporated them in subsequent strategies. This was summarized in the first interim report. At the end of the second year of the grant, student representatives responded to an open ended evaluation tool designed by the project director covering twelve major areas. The tools and samples of these responses were attached to the second interim report.

At the end of the grant, the project director devised a lengthy tool based on

1. the responses from the earlier open-ended questionnaire
2. visits to each clinical group and to one of each professor's Small Assembly Sessions
3. educational theories of Jerome Bruner and Benjamin Bloom, as well as Robert Gagne's nine aspects of an instructional event, to determine student satisfaction and their perceptions regarding departmental implementation of a competency-based, humanistic nursing curriculum. This tool is included in Appendix G.

The extensive data obtained are even now being tabulated as secondary sources in a doctoral dissertation.

Preliminary findings seem to indicate that students recognize that Humanistic values were practiced by the department and individuality and freedom of choice were considered but the impression is the Mastery System still is more important than the single person. Critical thinking and problem solving were seen as key objectives of the program. Strategies of self-paced study, simulations in discussion in Small Assembly Sessions, weekly test questions and year-end competency exams, as well as clinical interchange of faculty and student, all

helped the student problem-solve and move from known situations to less familiar ones when making decisions.

Enrichment projects required to qualify for superior grades were rejected because the modules and clinical preparation's are currently so demanding.

Dismissal from the program because of failing to pass 30-40% of a course's total content on weekly mastery tests at 80% level of achievement is considered too drastic and faculty currently are conducting research on alternate grading practices.

- 3.) Seniors graduating from the program in 1979 and 1980 were asked to evaluate with a Likert rating scale whether the school offered them the opportunity to learn the nine terminal objectives and to what degree they personally achieved those nine terminal competencies. Currently data are being analyzed.
- 4.) After six months the graduating class of 1979 was sent a follow-up questionnaire regarding terminal competencies and they were provided a similar questionnaire to give to their employer. Both groups recorded positive attitudes toward Madonna Graduates' preparation and competency in clinical settings after the initial orientation.
- 5.) Faculty required that each class, (offered three per year), rate the course, citing strengths and weaknesses as they perceived it in the course. Suggestions were weighed carefully and revisions are being made where appropriate. Senior students especially felt competent to voice concerns about curriculum content as the faculty showed them as sophomore and juniors where information would be introduced or reinforced. Students recommended more information on communicable disease and gerontology in the Senior Distributive Nursing Modules. In the finalizing of the modules for Academic Year 1980 this was accomplished. In discussing the new curriculum, a senior faculty member reported about Senior R.N.s returning for their degree, "One of the biggest changes I have noticed is in the awareness and attitude toward the nurse in the expanded role as being very relevant."
- 6.) The monthly curriculum of the whole meeting and especially the year-end curriculum colloquy helped faculty assess this program as they discussed spiraling threads. For example, junior faculty expressed concern whether the rehabilitation/chronicity aspects of their acute care topics were sufficiently being developed. Dialogue resulted in the addition of one more general topic to the chronicity modules in NUR 462 and overall appreciation of the quality and scope of that course was expressed.
- 7.) The project director did peer evaluations on each full-time faculty members' classroom teaching (S.A.S.). While the discussions were very stimulating, she made a few overall recommendations to enhance the effectiveness of the learning strategies.
 - a.) A need to specifically refer to the module's enabling objectives at the beginning of class to forestall misinterpretation of the role of discussion questions in the format of the module.

- b.) A need to rephrase the discussion questions using familiar but different examples to be sure transfer of knowledge and problem solving is occurring and not rote memorizing.
- c.) A need to conclude the Small Assembly Session with a summative referral to the enabling objective to keep refocusing on critical knowledge.

To further reinforce these strategies, at the year-end colloquy a junior faculty member was asked to discuss how she facilitates learning by using problem solving/critical content techniques. The "Burn Module" in NUR 366 was her excellent example of high level cognitive expectations.

- 8.) The project director visited sixteen clinical groups in Academic Year 1979-80. In informal dialogues, students evaluated their curriculum or clinical experience or the competency-based methods used at Madonna. (As indicated earlier in this section of the report, remarks were noted and validated through the use of an extensive questionnaire designed after those visitations and administered to seniors in April 1980. Their opinions were sought as summative, criterion reference evaluative research. The results and conclusion will be completed and published by December 1980.)

PART D Changes

Fortunately, the goals of the project were completed as identified in the original project. No changes were made.

PART E Impact of project on setting and contribution to nursing.

1. The funding of this proposal has had tremendous impact on the nursing curriculum at Madonna College. It enabled the department to develop a highly coordinated program that features:
 - a. a strong curriculum (documented in the challenging modules created for Family-Centered, Episodic/Distributive Nursing)
 - b. self-paced learning strategies employing competency-based (Mastery Learning) and Discovery mode educational principles

A quality Health Instruction Center was created through funds made available by the grant. Students were expected to gain

- 1) clinical skills by use of the Health Instruction Center's practice lab for demonstrations, practice, testing of psychomotor skills and remediation;
 - 2) cognitive problem-solving skills by doing self-paced, independent study of modules using the autotutorial laboratory of the Health Instruction Center prior to assembly sessions with the professor/role model. (See Bruner's theories on competency¹);
 - 3) flexibility of schedule through private monitory mastery testing in the Health Instruction Center when a course was totally student-paced or when repeat testing of a weekly module was required after remediation.
2. A statement regarding "impact" submitted by Dr. Patricia Vint, Director of the Health Instruction Center, for this final report may be found in Appendix H.
3. The change in educational strategies facilitated by the grant had dramatic impact on the college library. For instance, the increased use of the reserve section where each course and each module had required readings, raised circulation phenomenally. Statistics collected from September 1978 through March 1980 indicate the following:

¹

Bruner, Jerome "Beyond The Information Given" Chapter 12, pp. 401-412

Circulated Books: 5,363
Circulated Reprints: 11,792
Circulated A/V: 34,577

Students were also loaned reading packets for each course. The administration and faculty weighed the advantages of having students seek out each module citation with the advantage of loosing precious study time and decided to provide the crucial articles in packets in so far as reprints and copyright laws would allow. The director of the Health Instruction Center wrote letters to gain duplication permission. At the end of each course the packets are scrutinized for completeness and losses are made up by the student.

4. Madonna students have impacted nursing and their community as a direct result of course requirements.

In Nursing 485 an area study is done. These extensive research projects have been used in three ways:

- a.) Students gain practical experience in research technique
- b.) Affiliating agencies and institutions have used the data collected as support information when applying for a Federal Grant or as rationale for agency action.
- c.) Students draw conclusion from the area study and carry out recommendations for change. Examples:
 1. Community Health Agency officially adopted an office manual developed by a student
 2. Local downriver community implemented a Cardio-Pulmonary Resuscitation program organized by student
 3. An exercise program for elderly using various agencies (Transportation, facilities, teacher) is still functioning after being started three years ago by a student
 4. Puppet show on childhood immunizations now circulating in a local Library System

Characters, script and handouts were created by graduates of 1980. Appendix I contains letters which further attest to community involvement by nursing students of Madonna College.

Students were asked to assess their impact on Health Delivery. Their remarks can be abstract into several catagories

1. Student presence provided more nursing attention to the patients (more nurse-hour per patient)
 - a. Staff-team leaders were relieved by student-team leaders of certain detail work so the former could spend more time with patients for assessment and providing for needs.

- b. Because student leaders have smaller teams they could take more time for patient assessment, and interpersonal relationship to afford psychological support to the patient and family.
- c. Sophomore and junior students do in-depth care for maternal-child-clients and acute care patients. They share information with staff, and up-date care plans.

2. Teaching responsibilities

- a. Extensive health teaching is done when one considers 120 sophomores and juniors and 120 seniors (basics and R.N.s) engage in it as part of weekly assignments.
- b. Teaching done for staff especially by seniors in NUR 430 accomplishing management duties:
 - 1. staff paid conference time was spent developing a topic -- not degenerating into gripe session
 - 2. students shared drug information and research and new approaches with staff
 - 3. R.N.s bring previous experience to learning setting and share with fellow students and staff

3. In psychiatric settings:

- 1. Faculty invite staff to share students' extensive reports and this serves as inservice education for those staff who choose to attend;
- 2. Community Mental Health seminars given by students serve two purposes: They are sent out into the community to explore available psychiatric and mental health resources and return to disseminate information to peers, patients and staff. A list of counselling centers was thus compiled according to geographical areas and distributed to faculty advisors to help students/families during crisis.
- 3. Discharge Planning done by students benefit patients and help staff fulfill their responsibility.
- 4. Degree Completion R.N.s remarked that they serve as more effective change agents and value continuing research at their site of employment. They "utilize assessment tools to collect data and determine needs." Others find themselves "more tolerant of different culture and value systems..." Another remarked she was more independent and accountable in decision making.

5. Students feel their presence and that of their faculty member does stimulate staff nurses to strive for their higher potential. When staff share their expertise, hypothesize students, their sense of self-worth is enhanced and perhaps "burn-out" due to frustration and impotence is stalled. "We gave the nurses positive feedback. They realized they were good teachers, good nurses and were really accomplishing something."
6. This grant has had an impact on the public image of Madonna's Nursing program. Since initiating the Modular, Competency-Based strategies and a curriculum which requires increasing personal responsibility independence and critical judgement, the clientele, both basic and R.N., are telling college administration "we know this is a hard program but its a good one so we want to be admitted." While there was a 2% drop in basic student enrollment the average ACT composite score has increased. Directors of Nursing at the participating agencies are pleased with Madonna graduates. They tell the staff administration, Madonna graduates have excellent grasp of theory, are more skillful than the usual new employee, and conducts themselves with high degree of professionalism.

There is Planned Impact on nursing profession. The nursing administration and faculty are planning to hold at Madonna College a national meeting for interested nurse educators in Academic Year 1980-81 to share our experiences in curriculum design, competency identification, module construction, establishment of a learning resource center and other issues related to Humanism, Discovery Mode, Mastery Learning and the nine aspects of an instructional event -- all areas developed in this grant and the topic of the project director's doctoral dissertation.

PART F Management of significant problems.

Two major problems were encountered during the course of the project.

1. In the first year of the grant when the 13 Episodic Nursing credits were to be modularized, the summer session workshops did not allow enough time for the task. It was anticipated that the unfinished work of the last course would be completed by the time the second ten week sequence (Nov. 8) began. However, because the faculty also were phasing out the medical-surgical nursing courses of the Generalist Curriculum they began to feel the stress of an impossible deadline. The Director of the Health Instruction Center likewise could not complete her responsibilities of printing and distributing the modules of the November sequence because they were not all written. The group discussed this at a regular departmental meeting and it was decided to approach the college administration with the request for release time. The President readily agreed and the chairperson sought out temporary clinical staff to relieve specific faculty from 30 to 60 contact hours in October to complete their assigned modules. This alleviated a temporarily stressful situation. Also, the college absorbed the \$9,000 that it cost for part-time clinical staff when the financial officer and project director did not request an official budget reallocation in a timely fashion.
2. The second problem encountered was with the test item bank. The project called for faculty to create test items that were coded to identify the course, the module and the enabling objective being evaluated. Faculty wrote them as they wrote their enabling objectives. They designed at least 4 items per objectives. When the weekly test was to be prepared secretaries were given selected cards to type into a multiple choice exam. In that way, printed tests were developed and saved for the following rotation of that course.

One faculty who created all the modules in NUR 200 and NUR 210 had little time so she created three tests for each module to prevent sharing of answers.

- a.) original version
- b.) alternate - or repeat test version
- c.) self-paced version

In October of the second year of the grant the in house computer specialist was invited to a faculty meeting to get some understanding of what type of exams would have to be programmed. Group sessions with persons preoccupied with an accreditation visit did not prove productive but it did serve to notify all parties what eventually should be accomplished as part of our "grant commitment."

Faculty became more attached to their alternate test system and

senior faculty elected to do Mastery tests rather than write the test item file cards.

During Term I 1979, the standing curriculum committee reminded the faculty that great advantages for perscribed remediation would occur if they would hand in cards of their items for input unto a computer disket, one for each module with a duplicate for the faculty member. Reluctant compliance was obtained after a concession by the project director that sample modules would "test" the system first.

So many for each objective would be elicited, a printer would make a single test and the test was to be xeroxed for the number of students being evaluated. A report which documents the difficulty with the plan and makes recommendation which are currently being accepted may be found in Appendix F.

PART G: Samples of Products.

Included is one set of all the modules written in this competency-based major for nurses' expanding role. Nine volumes complete the set. This is the major product.

Printed articles or descriptions about Madonna College, Department of Nursing Curriculum and strategies appeared in the several publications and xerox copies are attached and may be found in Appendix J.

A fourteen minute slide tape presentation was created describing the curriculum and strategies as well as polices for both basic and Degree Completion R.N. students. It could be made available to interested persons and is used for information and recruitment purpose.

PART H: Plans for continuing the project activities.

The modular system and competency-based autotutorial learning is firmly established at Madonna College, Department of Nursing. Module revisions to reflect changing social and professional realities and policy reassessments are the only changes expected. The administration intend to assume the cost of personnel staffing the Health Instruction Center.

The learning packages (modules) give the department new flexibility. It is anticipated that they will be used in three ways:

1. Investigate feasibility of establishing consortial arrangements with up-state senior colleges for general studies courses and use our modules to create out-reach programs for R.N.s in communities less accessible to baccalaureate institutions offering B.S.N. degree. (Petosky Michigan nurses have written a request and a letter for response is found in appendix K.)
2. Investigate, with the intention of establishing an accelerated 12-16 month nursing sequence of our modularized 51 credit major for post-degree, second career persons. The St. Louis University model would be carefully studied.
3. Select from the Madonna College modules learning units suitable for Continued Education offerings and coordinate their use through Madonna College's newly established Continued Education System.

Our conceptual framework is well suited to a master's program, including a Geriatric Nurse practitioner role as part of a Masters concentration in Distributive Nursing. The College has a committee to study the feasibility of establishing a graduate program at Madonna but that eventuality is in the somewhat distant future.

APPENDICES

GRADUATING NURSE COMPETENCIES

The graduating Madonna College nursing student will be able to:

1. Incorporate concepts of Judeo-Christian humanism in self-developing activities, inclusive of aesthetic and spiritual enrichment, as well as in the practice and appreciation of nursing, an evolving profession.
2. Utilize the nursing process caring for clients and groups of clients from differing cultural backgrounds, at varying levels of development, and at varying stages of the health continuum.
3. Demonstrate skills in guiding and directing other members of the nursing team.
4. Collaborate in a collegial manner with other members of the community involved in the delivery of human service.
5. Demonstrate effective communication skills so as to promote health, intervene therapeutically and otherwise express ideas cogently and creatively.
6. Utilize in an electric manner, theory content from the natural and behavioral sciences and the humanities, to understand and explain human needs as well as to intervene effectively.
7. Appreciate good research, incorporate relevant findings into activities and conduct studies appropriate to one's ability and situation.
8. Seek acceptance to graduate school.

These competencies expected of graduates are mastered as students complete specific year-end competencies for the family centered Sophomore year, Episodic Nursing Junior year and Distributive Nursing Senior year.

Sophomore Level Terminal Competencies

- I.....Sophomore students will become acquainted with concepts of professionalism as they apply to nursing and its expanding functions.
- II.....Sophomore students will understand the steps of the nursing process and will apply them when caring for clients in the emerging and evolving family.
- III.....Sophomore students will build on the knowledge of Growth/Development, and sociology to better understand the normal phenomenon of childbearing and child-rearing, reinforcing that holistic man is capable primarily of growth as well as adaptation.
- IV.....Sophomore students will care for family members whose health needs require hospitalization for such things as normal delivery, post-partal and newborn care or problems common to the various epochs in the life cycle, especially the young child.
- V.....Sophomore students will begin to utilize principles of communication skills to:
 - a. Gather data for family assessment.
 - b. Promote health and enlist client cooperation via health teaching.
 - c. Promote self-growth.
 - d. Use herself in therapeutic interactions.
 - e. Properly prepare both class and clinical written assignment.
- VI.....Sophomore students will demonstrate application of psychosocial theories and a humanistic perspective in her family-centered nursing assignments.
- VII.....Sophomore students will demonstrate ability to utilize knowledge of anatomy, physiology, biochemistry, microbiology, nutrition and pharmacology to assess client needs, plan nursing care, and intervene effectively.
- VIII.....Sophomore students will demonstrate in written care plans and in clinical behaviors an awareness of and respect for client's preferences especially cultural, aesthetic, spiritual and philosophical.
- IX.....Sophomore students will demonstrate an appreciation for and understanding of the various other health workers roles by describing in care plans when their assistance is required and by showing beginning ability at making referrals to or utilization of such specialists or agencies.

Junior Level Terminal Competencies

- I.....Junior level nursing students will apply the nursing process in caring for clients with acute-psycho-biological health deficits of progressive complexity.
- II.....Junior students will identify and interpret abnormal laboratory values and diagnostic findings of increasing complexity and apply this knowledge in the planning and implementation of acute nursing care.
- III.....Junior students, building on their awareness of the health-illness continuum, will recognize maladaptation and apply appropriate psychopathological-pathophysiological principles to assess needs and to therapeutically intervene particularly with acutely ill clients.
- IV.....Juniors will demonstrate their humanistic, family-centered nursing orientation by planning both for client and family needs during episodes of acute illness.
- V.....Junior students will explain and apply in written care plans and in clinical behavior their knowledge of the principles of crisis intervention.
- VI.....Junior students will demonstrate their ability to use interpersonal relationship skills and their knowledge of need gratification by producing perceptive process recordings and intervening in psychologically supportive ways both in medical-surgical and psychiatric settings.
- VII.....The Junior student will demonstrate a developing skill as health teacher by producing formal and informal teaching plans for hospitalized patients and their families, with particular emphasis on discharge preparation.
- VIII.....Junior students will produce documentation that they can make increasingly discriminative nursing judgment based on broad and unsightful use of support knowledges.
- IX.....Junior students will show ability to function effectively as part of the health team in general and as a collaborative member of the nursing team in particular.
- X.....Junior students will demonstrate by their behavior in the classroom and in the clinical area that they perceive themselves as problem-solvers, experiential learners, and as individuals responsible for their own self-growth and professional competency.

Senior Level Terminal Competencies

Senior Students:

- I.....Apply principles of group process to effectively coordinate nursing care in a variety of client settings and through a diversity of care systems.
- II.....Apply nursing process to clients and client groups within health care agencies and in the community.
- III....Demonstrate that they are critical consumers of research by analyzing existing research.
- IV.....Demonstrate understanding of research by submitting a research proposal.
- V.....Demonstrate an appreciation of professional nursing organizations through attendance at a minimum of one meeting of the Michigan League of Nursing, Michigan Nurses Association, National Student Nurses Association (or others with approval of instructor).
- VI.....Demonstrate an awareness of and ability to evaluate current health and nursing trends and issues..
- VII....Demonstrate ability to utilize change theory in designing a plan for change in order to solve a problem in a clinical setting.
- VIII...Identify local and national health needs, analyze adequacy of the health care delivery system in meeting the needs, and suggest viable alternative. (1, 2, 3, 7)
- IX.....Demonstrate an awareness of how the world's health needs and health care delivery systems interrelate and affect each other.
- X.....Identify political factors and organizations that shape and influence health care delivery.
- XI.....Evaluate the quality of health care through currently available tools.
- XII....Demonstrate an understanding fo the legal implications in nursing practice.
- XIII...Demonstrate understanding of the involvement of professional accocunt-ability (licensure, certification, specialization, peer review).
- XIV....Initiate and coordinate contacts between clients and appropriate community resources.
- XV.....Identify client's and groups of clients learning needs and appropriately apply teaching.
- XVI....Operate as therapeutic agents within a family milieu.

Senior Students: (continued)

- XVII...Consider the inter-relationship between the family and the community and the effect of each upon the other.
- XVIII...Utilize epidemiologic concepts to explain disease patterns and trends particularly in the United States, but with a beginning understanding of problems in other nations.
- IXX....Anticipate health problems and intervene to prevent or minimize their impact.
- XX.....Demonstrate responsibility for their own personal and professional development.
- XXI....Utilize a holistic approach when planning and intervening to meet health needs, recognizing the spiritual dimensions and individual rights of each person.
- XXII...Develop beginning skills in identifying political, economic, special and environmental problems that hinder the delivery of health care services through completion of a systematic community assessment.
- XXIII..Demonstrate beginning level skills in developing and implementing interventions directed at solving health problems identified through completing a community study.
- XIV....Develop an awareness and beginning skills in the rehabilitative aspects of nursing of the chronically ill patient in the distributive care setting.

120 CREDITS

COURSE SEQUENCE: NURSING MAJOR
Episodic/Distributive Curriculum

MAJOR 51

TERM I: (September-December)

FRESHMAN YEAR

Deals With The Natural Man

TERM II: (January-April)

CHEM 111 Inorganic Chemistry 4
 BIO 243 Anatomy/Physiology I 3
 PSY 240 Human Growth/Dev. I 4
 Gen. Studies 4
15

CHEM 161 Intro. Life Science 4
 BIO 244 Anatomy/Physiology II ... 3
 PSY 241 Human Growth/Dev. II 4
 *Gen. Studies 4
15

*General Studies highly recommended this year: SOC 101 and ENG 101 or its equivalent.

TERM III: (May-June)

+ NUR 200 Introduction to the Nursing Process 3

(Non-Clinical)

SOPHOMORE YEAR

Deals With The Family Man

NUR 210 Family
 Centered Nursing I..... 5
 NUR 295 Family
 Centered Nursing II 5
 BIO 226 Microbiology 4
14

+NUR 296 Family Centered
 Nursing III 5
 *Gen. Studies/Electives 8-10
13-15

JUNIOR YEAR

Deals With The Family Man In Psycho-Biological Stress Situations

NUR 310 Crisis Intervention
 Nursing Core 1
 NUR 347 Episodic Nursing I 4
 NUR 365 Episodic Nursing II 6
 Gen. Studies/Electives 4
15

+NUR 366 Episodic Nursing III 7
 BIO 371 Pathophysiology II 3
 *Gen. Studies/Electives 4-6
14-16

SENIOR YEAR

Deals With The Communal Man

NUR 410 Intro. To Distributive
 Nursing 1
 NUR 430 Distributive Nursing I ... 5
 BIO 360 Epidemiology 3
 Gen. Studies/Electives 4-6
13-15

+NUR 462 Distributive Nur. II 5
 +NUR 485 Distributive Nur. III 4
 *Gen. Studies/Electives 4-6
13-16

* General Studies: English Composition, Humanities 105, Philosophy, History, Art/Music,
 Religious Studies (Inclusive of RST 407), Sociology.

The schema represents the sequence of required courses. The student should realize the
 general studies and electives that complete the 120 credit degree can be taken in any
 of these semesters or during Term III of any Academic Year.

+ Courses interchangeable with modular - 10 week scheduling.

MADONNA COLLEGE

36600 Schoolcraft Road
Livonia, Michigan 48150

CHALLENGE STUDY GUIDE

Course: Nursing 347, Episodic Nursing I

Faculty: Judy Rizzo, R.N., M.S..
Kathy Emrich, R.N., M.S.

Description: Episodic Nursing I is designed to introduce the student to the care of the individual who has difficulty in relating effectively, coping with life experiences and/or adapting to the environment in hospital and the community. The focus of the course is on the client experiencing an acute episode of illness. The theory and methodology of crisis intervention continues to be expanded and refined along with the importance of the role of the family in illness. The nursing process, concepts of communication and therapeutic use of self are strands throughout the course. Erikson's Developmental Stages and Maslow's humanistic theory of psychology are the frame of reference used for nursing assessments and planned interventions with individuals. Communication techniques are examined and interpreted utilizing Freudian, Sullivanian and Rogerian concepts.

General Course Objectives:

At the completion of this course the student will be able to:

1. Use a humanistic, holistic frame of reference to:
 - A) assess a family members' psycho-social state determining needs, problems and strengths.
 - B) comprehend and analyze the effects of communication and relationship theory (IPR).
 - C) utilize the nursing process in developing an individual plan of care for a chosen client.
2. Describe how treatment of mental illness can be approached by problem solving.
3. Demonstrate the understanding that positive and deliberate therapeutic action is best carried out within the specific framework of the therapeutic nurse-patient relationship.
4. Identify interpersonal skills that the nurse will use in all aspects of her life -- both professional and personal.

5. Apply communication techniques related to therapeutic interviewing of clients and their families.
6. Identify, contrast and describe the characteristics of the five major classifications of mental illness and apply the framework of human development by:
 - A) identifying nursing approaches to each classification.
 - B) formulating a plan of care.
 - C) taking into account a person's age and stage in life.
 - D) using Crisis Intervention theory where applicable.
7. Describe and identify and cite circumstances for the medical and psychological methods used to treat mental illness.
8. Identify specific nursing actions underlying the principles of psychiatric nursing and can demonstrate the application of those principles to clients and situation encountered in a variety of health care settings.
9. Can begin to identify her own philosophy of life in relation to a counseling role with those mentally and physically ill.
10. Exercise beginning skills in using community mental health resources after researching the agencies aims and purposes, particularly providing referrals for clients and families in stress.

Module Titles and Competencies:

1. Introduction to Psychiatric Nursing

At the completion of this module the student will demonstrate an understanding of the importance of the delivery of care to the client who has difficulty coping with stress and adjusting to his environment.

2. Therapeutic Relationships

At the completion of this module the student will demonstrate an understanding that positive and deliberate therapeutic action on the part of the nurse is best carried out within the specific framework known as the therapeutic relationship.

3. Part A: Communication
Part B: The Psychiatric Interview

At the completion of this module the student will be familiar with the principles and practice of communication skills. He/she will discuss and apply techniques related to therapeutic interviewing to psychiatric clients. He/she will demonstrate an ability to evaluate the interview, identifying actions that continue to be helpful in future interviews.

4. Personality Development and Theoretical Psychodynamic Concepts

At the completion of this module the student will demonstrate an understanding of the dynamic stages of personality development. He/she will have a beginning grasp of the major tenants of selected theoretical frameworks explaining this development.

5. Part A: Psychosis
Part B: Depression/Suicide
Part C: Organic Brain Syndrome
Part D: Neurosis
Part E: Personality Disorders

At the completion of this module the student will identify, contrast and describe the characteristics of the five major classifications and subgroupings of mental illness and can identify the nursing approach(s) to each classification.

6. Treatment Modalities

At the completion of this module the student will identify, describe, and cite circumstances for the major physiological (somatic) and psychosocial therapies used to treat mental illness. He/she will begin to identify his/her own philosophy in relation to a counseling role and define a theoretical base he/she chooses to use in psychiatric mental health nursing practice.

7. Integration of Psychiatric Concepts: Community Mental Health

At the completion of this module the student will identify specific nursing interventions underlying the principles of psychiatric nursing. He/she can demonstrate the application of these actions to clients and situation encountered regardless of the health care setting.

Required Text:

Burgess and Lazare, Psychiatric Nursing in the Hospital and the Community, Englewood Cliffs, N.J.: Prentice Hall; 1976

Payne and Clunn, Psychiatric Mental Health Nursing, Flushing N.Y.; Medical Examination Publ. Co., 1974

N.B. Please see handout entitled PROCEDURE FOR TAKING CHALLENGE EXAMINATIONS IN NURSING (available in the nursing department office) for specific instructions for testing and clinical validation. Individual copies of each module are available in the Reserve Room of the Madonna Library. They may be taken out, no more than two at a time, for up to a one week period.

Study guide prepared June, 1979
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MADONNA COLLEGE

36600 Schoolcraft Road
Livonia, Michigan 48150

CHALLENGE STUDY GUIDE

Course: Nursing 365, Episodic Nursing II

Faculty:

Description: Episodic Nursing II is the application of the nursing process to clients undergoing acute biological stress episodes that relate to homeostatic mechanisms and oxygen transport and identification of the family and client's physiological and psychological adaptation to illness.

General Course Objectives:

Upon completion of this course, the student should be able to:

1. Utilize the nursing process, in the planned care of clients experiencing an acute health deficit, as a basis for developing a flexible and comprehensive plan of nursing care.
2. Utilize physical assessment skills and the nursing history in differentiating normal and abnormal findings.
3. Identify the pathophysiological and psychosocial problems in the planned care of clients with altered homeostatic mechanisms and oxygen transport utilizing a scientific nursing approach.
4. Function as a health teacher promoting a high standard of health and the prevention of illness by developing teaching plans for clients.
5. Perceive themselves as problem solvers, experiential learners and the individuals responsible for their own self growth and professional competence.
6. Demonstrate knowledge of recurring nursing problems and methods of alleviating these problems that demonstrate a beginning role of nursing research, thereby expanding the body of nursing knowledge.

Module Titles and Competencies:

1. Physical and Diagnostic Assessment of Respiratory Function

At the completion of this module the student will be able to describe and interpret common respiratory diagnostic procedures and implement appropriate nursing care.

2. Hypoxia/Hypercapnea

At the completion of this module the student will utilize his/her knowledge of pathophysiology, assessment and management in applying the nursing process to the care of patients with selected respiratory conditions which lead to hypoxemia, hypoxia, hypercapnea, and acute respiratory failure.

3. Nursing Care of the Patient Experiencing Pneumonia; Surgeries of the Chest; A Tracheostomy

At the completion of this module the student will be able to assess the patients response to pneumonia, surgeries of the chest and tracheotomies. He/she will then design individualized nursing care plans for patients with these problems.

4. Electrical, Mechanical and Chemical Alterations of the Cardiac Cycle

At the completion of this module the student will be able to apply knowledge of the pathophysiology, assessment, and the management of cardiac failure while using the nursing process to care for patients with selected electrical, mechanical, and blood transport problems of the heart.

5. Renal Failure

At the completion of this module the student will be able to apply knowledge of the pathophysiology, assessment, and management of renal disorders in the care of patients with selected renal conditions which lead to renal failure.

6. Nursing Care of Patients with Congestive Heart Failure

At the completion of this module the student will be able to describe the pathophysiological changes that occur in the client with Congestive Heart Failure. He/she will assess that client and plan appropriate nursing care.

7. Peripheral Vascular Resistance/Obstruction

At the completion of this module, the student will be able to assess peripheral vascular status and plan care to facilitate blood flow and prevent further circulatory impairment.

8. Surgeries that Insult Sexual Identity

At the completion of this module the student will be prepared to care for the client undergoing surgery that is an insult to their sexual identity, i.e. mastectomy, hysterectomy, and prostatectomy.

9. Nursing Care of Clients with Disorders of the Blood

At the completion of this module the student will be able to discuss the pathophysiologic basis of selected disorders involving erythrocytes, leukocytes, reticulo-endothelial cells and platelets; their diagnosis and treatment, and identify nursing problems and the nursing care activities to alleviate those problems.

Required Textbooks:

Bergersen, Betty S. Pharmacology in Nursing, St.Louis:
C.V. Mosby Co., 1973

Luckmann, Joan & Sorensen, Karen. Medical-Surgical Nursing:
A Psychophysiologic Approach, Philadelphia: W.B.Saunders Co., 1974

Robinson, Corrine H. Basic Nutrition & Diet Therapy, New York:
Macmillan Publishing Co. Inc., 1975

Additional References:

Beland, Irene and Passos, Joyce. Clinical Nursing, Third Edition
New York: Macmillan Publishing Co. Inc., 1975

Jones, Dorothy A. et al Medical-Surgical Nursing New York:
McGraw-Hill Book Co., 1978

N.B. Please see the handout entitled PROCEDURE FOR TAKING CHALLENGE EXAMINATIONS IN NURSING (available in the nursing department office) for specific instructions for testing and clinical validation. Individual copies of each module are available in the Reserve Room of the Madonna Library. They may be taken out, no more than two at a time, for up to a one week period.

Study guide prepared June, 1979

CHALLENGE STUDY GUIDE

Course: Nursing 366, Episodic Nursing III

Faculty: Muriel Elmer, R.N., M.S.N.

Description: Episodic Nursing III is the application of the nursing process to clients with increasingly complex nursing problems related to cellular nutrition, neurohormonal regulation, and skeletal continuity; and intervening to meet the learning needs of the client and family in order to promote a return toward homeostasis.

General Course Objectives:

Upon completion of this course, the student will be able to:

1. Utilize the nursing process in the planned care of clients with increasingly complex nursing problems.
2. Continue use of physical assessment skills in differentiating normal and abnormal findings during the nursing history exam.
3. Identify the pathophysiological and psychosocial adaptations in clients with alterations in cellular nutrition, neurohormonal regulation, cellular proliferation and skeletal continuity utilizing a scientific nursing approach.
4. Function as a health teacher promoting a high standard of health and the prevention of illness by developing teaching plans for client.
5. Perceive themselves as problem solvers, experiential learners and individuals responsible for their own self growth and professional competence.
6. Demonstrate knowledge of recurring nursing problems and methods of solving those problems that will guide the planning of research project and further the development of a body of nursing knowledge.

Module Titles and Competencies:

Nutritional Madadaptations

At the completion of this module the student will be able to assess the nutritional status of a client. He/she will be able to identify disorders of the gastrointestinal tract, and display knowledge of the underlying pathophysiology. He/she will plan for and provide nursing care to these clients.

Part I: Nursing Care of Patients Experiencing Changes in Their Perception and Coordination

At the completion of this module the student will be prepared to assess the patient experiencing changes in perception and coordination and care for the patient who has undergone trauma to the head.

Part II: Nursing Care of Patients Experiencing Changes in Their Perception and Coordination

At the conclusion of this module the student will be able to utilize the nursing process in caring for patients with alterations in perception and coordination due to trauma to the spinal cord, seizures, meningitis, cerebrovascular accidents, and those undergoing neurosurgery.

Alterations in Neurohormonal Regulation: Thyroid and Adrenal

At the completion of this module the student will be able to utilize knowledge of the pathophysiology, assessment, and management in applying the nursing process to patients with selected thyroid or adrenal conditions which are a result of altered neurohormonal regulation.

Alterations in Neurohormonal Regulation: Pancreatic

At the completion of this module the student will be able to utilize knowledge of pathophysiology, assessment, management and education in applying the nursing process to patients with altered carbohydrate metabolism secondary to an absolute or relative shortage of endogenous insulin.

Alterations in Visual and Auditory Acuity

At the completion of this module the student will be able to utilize knowledge of pathophysiology, assessment, and management in applying the nursing process to the care of patients with selected auditory and visual disturbances.

Nursing Clients with Abnormal Cellular Proliferation

At the completion of this module the student will be able to describe the altered homeostatic mechanisms of cancer, three treatment measures, the nursing problems of the cancer patient, and nursing measures to alleviate these problems.

Nursing the Patient with Liver and Biliary Tract Dysfunction

At the completion of this module the student will be able to assess the patient for abnormalities in liver and biliary function and be prepared to design nursing care for patients with cirrhosis, pancreatitis and those undergoing a cholecystectomy.

Nursing Clients with Skeletal Alterations

At the completion of this module the student will be able to describe the physiology of fracture healing, types of traction utilized, and the problems of immobility associated with skeletal and joint disorders.

Burn Trauma

At the completion of this module the student will be able to prescribe a nursing regime for the client who has experienced severe burn trauma and contact dermatitis.

Required Texts:

Bergersen, Betty S. Pharmacology in Nursing, St. Louis:
C.V. Mosby Co., 1976

Luckmann, Joan & Sorensen, Karen. Medical-Surgical Nursing:
A Psychophysiological Approach, Philadelphia: W.B. Saunders Co., 1974

Robinson, Corrine H. Basic Nutrition & Diet Therapy, New York:
MacMillan Publishing Co., 1975

- N.B. Please see handout entitled PROCEDURE FOR TAKING CHALLENGE EXAMINATIONS IN NURSING (available in the nursing department office) for specific instructions for testing and clinical validation. Individual copies of each module are available in the Reserve Room of the Madonna Library. They may be taken out, no more than two at a time, for up to a one week period.



Position Description

TITLE:

LEVEL COMPETENCY COORDINATOR

QUALIFICATIONS:

Ph.D. or Master's Degree
Nursing Expertise
Excellent Interpersonal Relationship Skills
Organizational/Administrative Abilities

RESPONSIBILITIES:

1. is responsible to the Department Chairperson for maintaining the smooth progression of basic and degree completion students through the specific year for which the coordinator is responsible.
2. assists the department chairperson, with consultation of the Course Facilitators, in the assessment and procuring of appropriate Agencies for student learning.
3. writes letters of Appreciation for the use of facilities by associates in her level; conducts ongoing evaluation of those facilities.
4. supervises the proper implimentation of the Curriculum's conceptual framework, acting as liaison with other level coordinators for the purpose of effecting the proper spiralling of content throughout the currimulum.
5. decides matters effecting the implementation of year-end Competency objectives.
6. is the second level of appeal for those faculty and students who are in dispute over matters both of theory or clinical consequence.
7. calls for and chairs the level meetings for her year.
8. assists the Chairperson by orientating new faculty assigned to her level to the currimulum in general and to the level expectations and practices in particular.
9. coordinates, with the director of the H.I.C., the utilization of its practice lab, giving due consideration the schedule of the faculty Assistant assigned to the practice lab.
10. consults with the Department Chairperson regarding matters related to the specific levels, including class scheduling for Terms I, II and III.

11. organizes the activity of producting, conducting, grading, and reporting year-end Competency exams.
12. acts as liaison between the coordinator of the Degree Completion students and course facilitators who provide teacher-made exams and study guides for challengeable courses at their level.
13. facilitates annual peer evaluations of associates' clinical and classroom teaching.
14. acts as Master teacher for BSN academic staff doing theoretical or clinical content. This function may be delegated to a faculty member with a Master's degree assigned to the same agency.
15. assists in the presentation of the Curriculum Colloque in May.



MADONNA COLLEGE

36600 SCHOOLCRAFT ROAD • LIVONIA, MICHIGAN 48150

Position Description

TITLE:

COURSE FACILITATOR

QUALIFICATIONS:

Master's Degree
Nursing expertise for content being taught
Ability to relate with others
Organizational aptitude

RESPONSIBILITIES:

Is responsible to the Competency Coordinator and through her to the Department Chairperson.

1. prepare a syllabus and update it after consultation with associates; submits one copy to the departmental secretary to be forwarded to the Academic Dean.
2. recommends and orders text books for course with due consideration of prepared assignments in the modules and after consultation with associates in related courses.
3. coordinates the implementation of content and themes from the curriculum's conceptual framework into her course.
4. arranges that the H.I.C. receives the course modules for duplication in a timely fashion.
5. makes provision for and keeps records of Mastery testing; notifies students of progress, particularly those experiencing difficulty; makes provision for repeat testing as to monitoring, room assignment and feedback sessions; notifies Student Growth and Honors Committee of those students in Academic jeopardy.
6. arranges guest lecturers for her course and facilitates taping of same, if content is valuable for subsequent students.
7. coordinates the activities of associates teaching the course and arranges for the use of the Practice lab in the H.I.C. when demonstrations, practice or remediations are required for implementation of course objectives.
8. assists the Competency Coordinator and departmental Chairperson in assessment and procurement of clinical facilities suitable to accomplishing course objectives.
9. distributes course-end evaluations and reviews module evaluations in an effort to keep the course responsive to the needs of the learner.

10. chairs the section meetings for the specific course.
11. orientates associates, especially clinical faculty, to the course requirements and clinical expectations.
12. exercises final decision regarding matters in dispute among associates relative to the individual course and syllabus.
13. hears and makes recommendations to students disputing decisions of associates in the theoretical or clinical portion of the course.
14. collects from Associates and submits for filing, all clinical evaluations of student performance.
15. submits to the Competency Coordinator by the first week in October the desired class times and number of rooms required for courses to be offered in the next Academic Year.
16. submits final grade reports to the Registrar with a copy to the department chairperson. Keeps competency coordinator appraised of student achievement throughout the 10 week sequence of courses.



MADONNA COLLEGE

36600 SCHOOLCRAFT ROAD • LIVONIA, MICHIGAN 48150

Position Description

- TITLE: DIRECTOR OF HEALTH INSTRUCTION CENTER
- QUALIFICATIONS: Master's Degree in Library Science/Media
 Administrative experience in a learning resource center
 Interpersonal Skills
 Meets qualifications for Madonna College faculty status
- RESPONSIBILITIES:
1. reports directly to the chairperson of the department of nursing
 2. works collaboratively with the chief librarian to effect the integrated cataloguing of all non-print and print materials.
 3. works collaboratively with the director of the Television and Graphics studio when these strategies are to be employed.
 4. works collaboratively with nursing faculty to implement the competency based curriculum.
 5. coordinates the reproduction and packaging of course materials in nursing.
 6. assists faculty in broadening their skills in developing instructional strategies.
 7. procures media for faculty review.
 8. directs the activities of the facilitator of the practice lab, secretary, technical assistant, and work study students assigned to the H.I.C.
 9. consults with departmental chairperson, nursing faculty, and facilitator of the practice lab to determine necessary disposable supplies for demonstration purposes.
 10. plans and conducts orientation to the H.I.C.
 11. supervises nursing students in their use of self-paced learning materials in the H.I.C.
 12. provides for proper maintenance of media hardware in the H.I.C.
 13. produces and distributes a newsletter for faculty and student for the purpose of updating them on H.I.C. activities.

14. collects utilization and evaluation data for the final report to the Department of Health, Education and Welfare.
15. serves on departmental committees and is a permanent member of the Library-Media committee.
16. attends all nursing department faculty meetings and appropriate Madonna College campus-wide meetings.



MADONNA COLLEGE

36600 SCHOOLCRAFT ROAD • LIVONIA, MICHIGAN 48150

Position Description

TITLE: FACILITATOR OF H.I.C. PRACTICE LABORATORY

QUALIFICATIONS: Bachelor of Nursing with experience in clinical nursing. Skilled in nursing's psychomotor techniques inclusive of physical assessment. Acquaintance with teaching experience with autotutorial, mastery or self-paced learning. Organizational skill

RESPONSIBILITIES: Is responsible to the Director of the H.I.C. for the organization and operation of the Practice Laboratory and related self-paced learning.

1. oversees the prescribed remediation activities of students, guiding the proper use of techniques, and finally signing their prescriptions noting successful completion of required activities.
2. schedules the use of the physical assessment room and insures the necessary examination supplies, hygienic conditions, and privacy required for this campus activity.
3. coordinates scheduling of practice lab usage between nursing courses and E.M.T. department.
4. facilitates the self-paced activities of Degree Completion students pursuing independent activities.
- *5. assists Director of the H.I.C. in implementing the self-paced testing activities, including maintaining faculty testing tools, monitoring the test taking and keeping results secure.
6. recommends purchase of supplies and equipment for student practice, even contacts agencies to purchase used equipment and instruments that would provide appropriate simulated clinical experiences.
7. insures the seasonal procurement of rented equipment.
8. maintains a check-out system for practice equipment.
9. supervises work of student assistants who might be assigned to the Practice Lab and in general assists the director in the work and staffing of the H.I.C.
10. attends monthly departmental meetings; participates in level meetings as invited.

REPORT ON COMPUTERIZED TEST ITEM BANK

During the academic year 1979-80 efforts were instituted to computerize the coded test item banks compiled for weekly module quizzes. Nursing 200, Nursing Process was chosen as the pilot course. The following is a report of the events which took place.

October 9, 1978, early in the semester, the Chairperson, Noreen O'Neill, Sr. Carolyn Therese of the Computer Office, and the faculty involved, C. Zenas, met to discuss in general what the computer could offer us and what the nursing department's expectations were. We selected modules 6 and 10 for trial runs of computerized testing.

It was immediately determined that each of the index cards with the individual test items would have to be reviewed in terms of suitability for transfer to the computer. All questions had to be coded using the same format. It was decided that diagrams would be added to the test after being run through the computer. Since each of the cards was already marked as to course number, module number and enabling objective, this was no problem.

After the test bank for module 6 was placed in the computer, by a staff member in computer services, a rough draft was returned to the faculty member for correction. Since she was familiar with computers, it was not difficult to become oriented to the format. Corrections were listed by the faculty and made by the computer staff (See Appendix i). The faculty member developed a form entitled "Computer Test Retrieval" which could be used to communicate such information as instructor's name, date test was required, number of copies, test title, general directions to students, and the enabling objective which was to make up each test item. (See Appendix ii)

After several tries, a computerized test print-out was returned to the faculty. (See Appendix iii) The computerized form then had to be cut and taped to fit a standard 8 x 11 sheet of photocopy paper. This version, along with the necessary accompanying diagrams was routed to the xerox service for duplication for student use. (See Appendix iv)

Student comments on the first run were as follows:

1. The print was difficult to read.
2. The "G" looked like the "S".
3. The diagrams at the back of the test were inconvenient. Students were forced to unstaple them and hold them next to the test question as they were answering it.
4. Items 17 and 20 were the same item (even though the computer retrieval order indicated that they were to be different items)

The faculty member again met with Sr. Carolyn and modifications were made in the test format, including a different type and more spacing between the test question stem and the possible responses. (See Appendix v)

Module 10 was submitted to computer services and the rough draft returned for "proofing." Numerous mistakes were noted in the rough draft. Ultimately these turned out not to be mistakes but a change in the computer program format which had not been relayed to the faculty member. Finally, after submitting the computer retrieval form, test 10 was returned to the faculty for cutting, pasting, and xeroxing.

IMPLICATIONS

The transition to computer tests from our current method of multiple tests (i.e. versions A, B, and C) for each module will be extremely time consuming. The computer services department has indicated that it will be the nursing department secretary's responsibility to put all the items into the computer itself.

This will entail 12 individual courses, each with 9-12 modules, (most likely with 600-1000 total items per course.) The rough drafts for each module must be meticulously examined by the responsible faculty and accurate corrections must be made. Faculty must then select the specific test items for the enabling objectives they will be testing and submit an order to the secretary who will then retrieve the items in a test format. (Faculty themselves possible could do this provided they were comfortable with the computers.) Each test must then be proofed, corrections made and paste-ups done. Finally the must be routed to the xerox department for copying; then back to the secretary for collating and stapling. When retakes are needed this entire procedure must be repeated again, all within one week's period of time, on an individual basis for each student requiring remediation.

CONCLUSION

Maintain current system of multiple forms of equivalent tests for each module until extensive computer services become part of the Health Instruction Center, subject to Nursing Department control.

Submitted by:

Carol S. Zenas

Date:

5-2-80

Health Instruction Center

Prepared by Dr. Patricia A. Vint
Director Health Instruction Center

The purposes of the Health Instruction Center are to identify, organize and evaluate the materials critical to the learning process and facilitate circulation and use of these materials.

The instructors indicate within the modules the activities designed to produce successful learning. The director of the Health Instruction Center and the instructors work together to identify and develop the kinds of experiences necessary to produce successful learning.

Once the experience has been identified, the learning events necessary to that experience must be coordinated and sequentially arranged.

Conveying the experience of the learning event from the source to the learner must involve the intent of the learning experience, the characteristics of the learner and the events necessary to provide the learning experience.

The design and integration of media into the modules has for a priority goal the placement of the learner into proximity with the learning experience. The Health Instruction Center is one of the environments in which the learning experience takes place.

The director of the center presents to the faculty, based upon past discussions, commercially prepared audio visual material which they evaluate as to relevance and accuracy. Many companies are interested in the opinion of the faculty as to effectiveness of the commercially produced materials and revise according to suggestions offered by the faculty.

In this way the grant has had an impact on commercially prepared audio visual materials for nursing education.

Many companies make available to the faculty new texts and the opinion of the faculty is sought as to suitability of the text in the modules. Through faculty evaluation, publishers have been made aware of the modules and the thoroughness of the text material that must accompany the module.

Faculty are encouraged to create their own audio visual materials. For example, interviewing techniques illustrating correct responses have been produced on the Junior and Senior levels (See Appendix i). Guest speakers, with their approval, are taped and thus can be focused upon again (See Appendix ii).

Feedback is facilitated by the use of audio and video tapes. Students are given an opportunity to see and hear themselves in various presentations so as to identify and correct with instructor's help faulty skills.

In the Health Instruction Center the four kinds of media are utilized (1) printed media (2) graphic media (3) photographic media and (4) electronic media.

The printed media consists of the books and reprint articles selected for the modules by the faculty which are deposited in the Reserve Room of the college library. These books and articles contain material which supplements the required textbooks.

Should a faculty member in researching the printed material for the modules not find suitable material, they are free to create their own.

The grant has had an impact on printed media in that the faculty has produced original material (See Appendix iii). The second area of impact has been the development of faculty research skills necessary to search out the best sources of material.

The graphic media consists of any three dimensional display. The Madonna College nursing faculty in each competency level has developed and produced original transparencies. Many of our faculty expand curriculum materials by redesigning charts, graphs and other text resources. In this way the instructors adapt printed words into visual concepts that they can verbally personalize for their students.

Within our program the photographic media has it's greatest use in the sphere of the motion picture. During the first year of the grant over two hundred films were brought into the Health Instruction Center for faculty preview. Returning each film, the Director of the Health Instruction Center included evaluations of the films. The impact of the grant was reflected in the companies that responded to the negative evaluations by asking for assistance in updating the script and format of their motion pictures.

The most popular media form utilized in the Health Instruction Center is electronic media consisting of audio recordings and video recordings accompanied by audio content.

The majority of video cassettes relating to nursing held by the college have been produced by the nursing faculty (See Appendix i). In the Junior and Senior level, students script

and perform in sketches illustrating proper nursing practices, interpersonal and communication skills.

Slides with accompanying text have been produced on the subject of nutrition, environmental survey techniques, and modular curriculum.

Audio visual materials are available to health care institutes within the metropolitan Detroit area. Hospital Directors' of Education e.g. Beaumont Hospital, Royal Oak, Michigan and Sinai Hospital, Detroit, Michigan find visits to the Health Instruction Center and loans of our audio visual material worthwhile in stimulating their educational programs.

An important part of the Health Instruction Center is the Demonstration Laboratory. The lab is equipped with hospital equipment and supplies. The atmosphere is that of a clinic. The laboratory has a large demonstration area as well as a physical assessment room and storage area. The laboratory is staffed by a experienced registered nurse with day and evening hours.

Starting with N.200, Nursing Process, generic and degree completion students utilize the lab throughout the nursing program.

There are two approaches to the Demonstration Laboratory. Students learn under the guidance and direction of the laboratory facilitator the elementary skills required by the course material and must demonstrate to the facilitator at a designated time the ability to successfully complete designated nursing procedures.

The second approach involves the employment by the instructor of the Remediation Prescription Form (See Appendix D).

An instructor observing the absence of a necessary skill will, after immediate correction, prepare a prescription form. On the form the instructor indicates the problem with instructions for long-term correction.

The student makes an appointment with the facilitator for retraining and assessment. Upon completing the requirement to the satisfaction of the facilitator, the student and lab facilitator both sign the form with comments.

From September 7, 1979 through April 29, 1980, 1,025 students have utilized the Demo Lab. The students are made proficient with specialized instruction and practice in the following areas:

- Medications
- Medical Asepsis
- Tissue Healing
- Fluids and Electrolytes
- Elimination
- I.V. Therapy
- Weighing Infant
- Insulin
- Urine Testing
- CVP
- Trach Cleaning
- Trach Suctioning
- Chest Tubes
- O₂ Respiratory
- Heart and Lung Assessment
- Respiratory Assessment
- Cardiac Assessment
- Postural Drainage
- Eye Assessment
- Nasogastric Tubes
- Peripheral Assessment
- Pursed Lip Breathing
- Neurological Assessment
- Peritoneal Dialysis
- Stump Care
- Sterile Field Preps
- Bladder Irrigation

As indicated in Figure 1, the Health Instruction Center consists of four separate areas plus the Demonstration Laboratory.

The cordless room is equipped to enable students to view and listen to films and video cassettes independently without hearing one another. Four programs can be simultaneously scheduled. Program selector and earphones for twenty-four students are available at three tables.

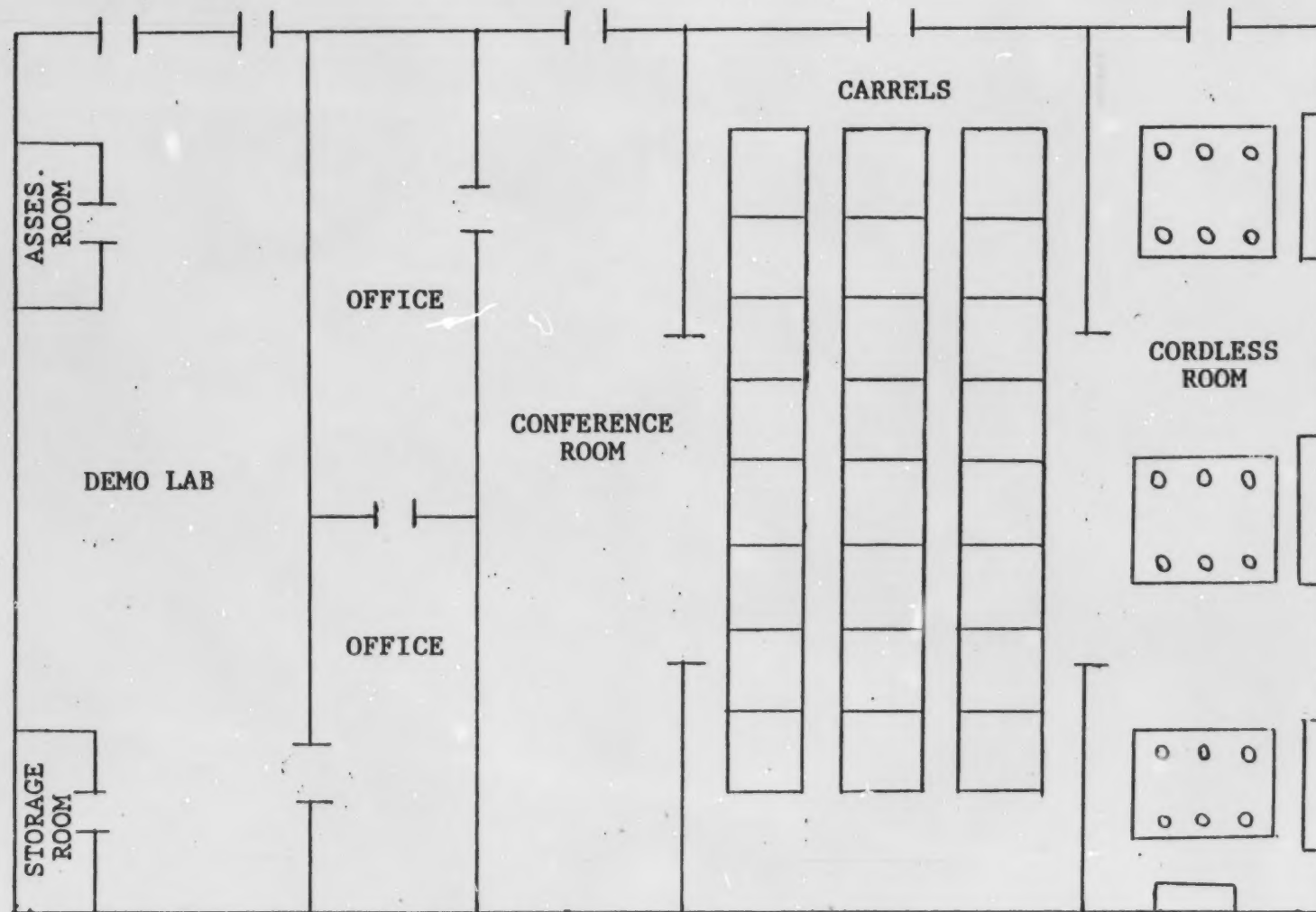
The twenty-four carrels again emphasize independent learning. Each carrel is "wet" and structured for isolation. The Health Instruction Center owns fifty-nine units of audio visual equipment. The equipment is easily interchangeable for student use.

Students and instructors receive individualized instruction as to operation of audio visual equipment. The instructions are given as many times as necessary.

For many of the older degree completion students, members of a generation in which instructional technology was not in vogue, the impact of the grant has been an expansion of their perception of teaching techniques. As they are being prepared for leadership positions in the nursing profession, it is hoped they will carry the new knowledge into the workplace.

All modules, accompanying references, and tests are typed duplicated and prepared in the office-conference areas of the center for either (1) sale in the bookstore (2) placement in library or (3) return to instructors. The vast quantities of material necessitated by the grant have impacted in several areas of the college. The library has had to expand the services extended to the nursing department. The library collec-

Figure 1



tion relating to nursing has been updated and extended.

Clerical services and duplication machinery have increased to meet the demands of paperwork.

The first step in our evaluative process was establishing purposes of seeking suitable media. Faculty preliminary previewing and reviewing by the Director of the Health Instruction Center insured that the media employed in the modules dealt with significant curriculum content and were suitable for intended students. These were our main purposes in selecting media. The price and technical quality were other factors considered in evaluating media for the modules.

Once the media was utilized by the student in carrying out the requirements of the modules; modern instructional practice required that students be asked their opinion of the modules including media employed. After the completion of each module, the students are asked to express their opinion as to organization, approach and educational benefits derived from the modules (See Appendixes E & F).

The instructors value the opinions expressed within the evaluative forms and revise according to intelligent appraisal of the forms.

The three years of the grant resulted in the development of an effective Health Instruction Center which has favorably impacted many aspects of faculty-student services rendered by Madonna College.

A summation of the impact of the grant as experienced by the Health Instruction Center is as follows:

Areas of Impact

1. Development and Revision of Commercially Produced Audio Visual Materials.
2. Development of Textbooks Suitable for Modules.
3. Development of Individualized Audio Visual Materials by Faculty.
4. Development and Expansion of Research Skills by Faculty.
5. Development of Student Instructional Skills.
6. Development of Educational Programs by Clinical Associates.
7. Development of Student Physical Assessment Skills.
8. Development and Growth of Service Areas of College.
9. Development of Evaluation Forms to Measure Student Opinion.

(Vint: Appendix 1)

Olivian DeSouza	1. Crisis Intervention Physiological & Psychological Disequilibrium
Muriel Elmer	MAD Congestive Heart Failure- Game
Kathy Emrich	1. The Psychiatric Interview 2. Crisis and Suicide
Joan Lee	1. Planning Process in Nursing Management 2. Budgeting Process in Nursing Management
Noreen O'Neill	Change Agent
Judy Rizzo	Introduction to Crisis Inter- vention
Peggy Shinkel	Community Health Interviewing Techniques
Jan Wolf	Comprehensive Exam Simulation
Carol Zenas	1. Nursing Recruitment 2. I.V. Techniques

(Vint: Appendix 11)

Guest Speakers

Roberta Mullin

Topic - Leukemia in Childhood

Dr. Edward Meyer
Associate Professor
Madonna College
Livonia, MichiganTopic - Current Advances in Cata-
ract SurgeryDr. Pierce
St. Mary Hospital
Livonia, Michigan

Topic - Renal Failure

Rosemarie VanIngen,
B.S.E.T.Topic - Nursing Responsibilities
for the Ostomy ClientDr. C. Vaughn, Director
Oncology Department
Providence Hospital
Southfield, MichiganTopic - Nursing Role With Chemo-
therapy and Current Research in
Chemotherapy

Zoe Smialek, R.N.

Sudden Infant Death

(Vint; Appendix iii)

Original Material Produced by Faculty

Jan Wolf	The Interrelationships Among Local, State and Federal Govern- ment
Jan Wolf	What Constitutes Good Medical Care
Jan Wolf	Looking at National Health Legisla- tion
Jan Wolf	Workers Compensation An Overview
Carol Zenas	Autotutorial Learning
Carol Zenas	Physical Appraisal Forms N.200

Student: _____ Grade: _____
Course: _____ Module: _____
(DX) Diagnosis of Problem Learning Area: _____

Date to be Completed:

Lab Assistant's Signature:

(Vint: Appendix v)

MADONNA COLLEGE
Department of Nursing

Sophomore Level Course Evaluation

1. What is your general opinion of N296, its organization and approach?

2. How did you like the modules? Did you feel they helped you to study and achieve the objectives?

3. Which modules did you find particularly helpful?

What was it you specifically liked about them?

4. Which modules did you find so helpful?

What did you not like about them?

5. What is your opinion of:

Pre and post tests?

The charts and other appendices?

The suggested magazine readings?

6. What is your opinion of the SAS discussions, and the various approaches which were used to involve students and to clarify module content?
7. Did you find the weekly quizzes helpful? Did the questions reflect content and objectives effectively? Please comment.

8. Audio-visual material

Please comment on the usefulness of the various audio-visual material in helping you master the module content. Did you find them interesting? Comments on specific titles are invited.

Dent Tapes

8. (cont'd.)

Slide - Tapes

Films

9. Did you find the guest lectures helpful? Please comment.

10. What would you change in the presentation or organization of the course? What would improve it?

(Vint: Appendix vi)

MADONNA COLLEGE
Department of Nursing

EVALUATION OF MODULES

TITLE OF MODULE:

MODULE DEVELOPER:

1. Were the objectives clear and easy to understand? If not, which objective gave the most difficulty?

2. How did you enjoy working on this module? Very much, some, a little, not at all. Please comment.

3. What was the most meaningful thing you learned while studying the module?

4. Did you feel the module was: too easy, too hard, too long, interesting, enjoyable, concise, understandable?

5. What learning experiences and activities did you like for this unit of study?

6. Did you receive adequate guidance and resources from the teacher?
7. How could this learning experience be improved?
8. How much time did you spend completing this module?

EQUIPMENT AND SUPPLIES PURCHASED FOR THE H.I.C. PRACTICE LAB

Sterile gloves
Bedpans (2)
Emesis Basins (4)
Footboards (2)
Stethascopes
Salem Sump Tubes (1 case)
Tape
Dressings
Insulin
Keto Diastix
Disposable syringes and needles
Lab coats
Sterile Sodium Chloride
Suction Cath Trays (1 case)
Alcohol Preps
Hot water bottles
Catheters
Forceps
Scale
TED hose
Tongue Blades
Enema Sets
Shampoo Tray
Foley Cath trays
Kerlix Bandages
IV stand
Snellen Eye Chart
Diagnostic penlights
Infant ID bracelets
Silver Nitrate eye drops
Bassinett and Mattress
Ophthalmoscope and otoscope (3)
Angiocath set
Bathblankets
Drawsheets
Spreads
Pillow Cases
Hospital gowns
Injectable Training Arm
Irrigation trays
Tuning forks
Male and Female Catheterization Models
Breast Model
Touchie-Feelies
Breast Model and Prosthesis
Disposable CVP Manometer Case
Pleuravac
Burretrol Mini drop tubing
Levine tube
Chest tubes and bottles
Trach tubes
Miller-Abbot Tube
IV fluids

Equipment for Autotutorial Learning
16 mm Projectors - Quantity (2)
Super Eight-Film Loop Projectors -
Quantity (10)
35mm Synchronized Sound Filmstrip
Projectors - Quantity (13)
AV Matic Viewers for Sound Film-
strip with Disc Records (2)
Cassette Players - Quantity (8)
Cassette Recorders/Players (10)
Slide Viewers - Quantity (8)
Sound Slide Projectors (6)

Van Buren Public Schools

Belleville High SchoolCARLOS A. FLORIDO
ASS'T. PRINCIPALBRUCE J. ROMANT
ASS'T. PRINCIPALLARRY J. TABOR
ASS'T. PRINCIPAL501 WEST COLUMBIA 697-9133
BELLEVILLE, MICHIGAN 48111JAMES F. RICHENDOLLAR
PRINCIPALRONALD HELLIER
ATHLETIC DIRECTOREDWARD H. STEINMAN
DIRECTOR OF GUIDANCEBILL NAGY
DIRECTOR OF VOCATIONAL
EDUCATION

March 27, 1980

Your program of individual student work to aid communities is excellent! The student, Leri Reston, made a outstanding contribution to my program and my students by her work on a unit in Human Reproduction. The unit is up-to-date thorough and with suggested audio materials that are current and available in this area.

Mona Vernon
Health Teacher

DEPARTMENT OF COMMUNITY RESOURCES

- Livonia Office of Volunteer Energies
- Information & Complaint Center
- City Commissions



Edward H. McNamara
MAYOR

Joan Duggan
DIRECTOR

33000 CIVIC CENTER DRIVE
LIVONIA, MICHIGAN 48154
421-2000

April 17, 1980

Madonna School of Nursing
36600 Schoolcraft
Livonia, Michigan 48154

Dear Volunteer,

Thank you so very much for your participation in the Project Health Fair held at the Livonia Senior Citizens Center. Your medical expertise was definitely needed and much appreciated. I think, on the whole, the fair was a success. We had 137 persons that took advantage of the screening. I do not know what percentage of people tested had health problems uncovered. But, whether the tests proved normal or abnormal, the results were valuable to each person tested.

Thank you again for your part in making the Project Health Fair such a success.

Sincerely,

Pat Clark

Pat Clark
Program Developer
Senior Citizens Program

PC/hc

BRIGHTON
area schools

SCRANTON MIDDLE SCHOOL Appendix I, cont.
125 s. church street
brighton, michigan 48116 telephone (313) 229-5000

January 28, 1980

Madonna College
36600 Schoolcraft
Livonia, Michigan
48154

Dear Fellow Colleagues:

I would like to take this opportunity to express my sincere gratitude for sending Mary Jo Terrill, a senior nursing student, to the Brighton area. She came to us with a sincere interest in the delivery of our Health Care Services to the students of the Brighton Area Schools. Her assessment of the need to reinstate an educational and health curriculum for our pregnant girls was supported by many of our school personnel.

Mary Jo's professionalism when interacting with our administrators, counselors and teachers was most impressive. Her research techniques on the subject of teenage pregnancy were very thorough. I know that this subject took her down many roads all over the state of Michigan. Her travel was either by road, phone or letter and I know she spent considerable time doing all three.

I truly feel she met the challenge of her assignment and in the process was coincidentally a tremendous resource to our educational system. I am the Supervisor of the newly implemented Family Planning Unit of our Health Education curriculum. Therefore, Mary Jo and I found that we could work together very nicely in these two areas which are so closely related.

Mary Jo has been instrumental in identifying a need in our school system and bringing it to the attention of our administrators. She did this in a very complete and tactful manner. We sincerely appreciate the time that Mary Jo devoted to this project and to the Brighton Area Schools.

Sincerely,

Kay Kroth

(Mrs.) Kay Kroth, R.N.
School Nurse

principal
ROBERT L. SCRANTON

Oakwood Hospital

OAKWOOD HOSPITAL CORPORATION

18101 OAKWOOD BOULEVARD • DEARBORN, MICHIGAN 48124 • 336-3000

DEPARTMENT OF NURSING

June 12, 1980

Ms. Noreen C. O'Neill
Chairperson, Nursing Department
Madonna College
36600 Schoolcraft Road
Livonia, Michigan 48120

Dear Ms. O'Neill:

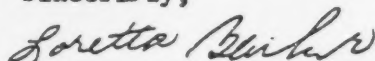
This letter is written in support of the nursing curriculum at Madonna College. Oakwood Hospital affiliates with all levels of students from Madonna and we have had very positive experiences with both students and faculty.

The medical floors particularly enjoy the senior and R.N. leadership students and their instructor. In fact, I have even received requests to have them affiliate on a floor. They have a mature attitude about the professional practice of nursing and are successful in working as a part of the nursing team. They seem to stimulate new learning and thinking for improving patient care.

We are also very impressed with the capabilities of the junior level students in medical/surgical nursing. They seem to receive a strong clinical exposure which we believe is important.

In closing, we actively recruit graduates of Madonna College, and are most anxious to employ as many as possible. Our experiences with students, faculty and graduates has been positive and we are most anxious to maintain a healthy affiliation with this school of nursing.

Sincerely,



Loretta Barber, R.N., MSN
Assistant Director of Nursing

/js

JUN 25 1980

PROVIDENCE HOSPITAL

16001 WEST NINE MILE ROAD • P.O. BOX 2043
SOUTHFIELD, MICHIGAN 48037 • PHONE 424-3000



Community
Service:
A Commitment

June 24, 1980

Noreen C. O'Neill
Chairperson, Nursing Department
Madonna College
36600 Schoolcraft Road
Livonia, Michigan 48150

Dear Noreen,

The nursing staff of Providence Hospital is impressed by the excellence of Madonna College faculty, students and graduates. We believe we enjoy many benefits as a result of our association with your institution. In fact, many Madonna College graduates are members of our nursing staff where they function in various roles including staff nurse, team leader, coordinator of patient education, coordinator for emergency medical service, head nurse in the center for out-patient surgery, head nurse in the intensive care nursery, and clinical care director for critical care. These graduates epitomize nursing at its finest; they possess excellent clinical skills as well as being fine leaders. Moreover, several of our nurses are pursuing baccalaureate degrees at Madonna. These nurses include an afternoon supervisor as well as several staff nurses.

My administrative staff has enjoyed working with your faculty. We appreciate the fine long range planning done and the excellent communication with faculty. In addition, our head nurses and clinical care directors believe Madonna faculty members to be well-prepared academically and have observed that they are clinically expert nurses who use good judgement and serve as excellent role models for our staff as well as for your students.

Sincerely,

Evelyn Eusebio, R.N., M.S.
Assistant Administrator
Patient Care Services

EE/ms

JUN 17 1980

VISITING NURSE ASSOCIATION

OF METROPOLITAN DETROIT

7700 SECOND AVENUE • DETROIT, MICHIGAN 48202 • TELEPHONE (313) 875-3266

June 17, 1980

Noreen C. O'Neill
Chairperson, Nursing Department
Madonna College
36600 Schoolcraft Road
Livonia, Michigan 48150

Dear Noreen:

Nursing is at a critical point in its development as a profession. It is vital that nursing schools remain alert and dynamic to the changing demands which nursing must face.

As a service institution, the Visiting Nurse Association of Metropolitan Detroit has been pleased with the opportunity to work with Madonna nursing students and faculty and to employ Madonna graduates on staff. The interdependence of nursing education and service is demonstrated by the cooperation which has existed with your department.

The VNA supports your efforts to continue and expand your nursing program. It is especially commendable to observe the opportunities you provide for registered nurses to become prepared at the baccalaureate level.

The VNA wishes you continued success in your curriculum development and your preparation of nurse leaders.

Sincerely,

Marie Gates

Marie Gates
Education Director

MG/jm

90c

81

JUN 20 1980



MERCYWOOD NEURO-PSYCHIATRIC HOSPITAL

4038 JACKSON ROAD - BOX 1127 - ANN ARBOR, MICHIGAN 48106 / PHONE: (313) 663-8571

June 19, 1980

Ms. Noreen C. O'Neill
Chairperson, Nursing Department
Madonna College
36600 Schoolcraft Road
Livonia, MI 48150

Dear Ms. O'Neill:

The students from Madonna College seem to be aware of the principles of communication skills and utilize these well in their nurse patient role. As the focus of health care is directed more toward the community, their preparation for the expanded role of nursing should be effective.

One of our staff is a graduate of the Madonna program and was promoted as supervisor upon completion of her degree. She performs in a very efficient manner with highly developed assessment and intervention skills. She is well prepared to address the expanding role of the professional nurse.

Madonna College should be commended for their development of a more futuristic curriculum.

Sincerely,

Mary Treves

Mary Treves, Associate Director
Nursing Service

MT:lbq

90D

82

ST. MARY HOSPITAL
36475 W. FIVE MILE ROAD
LIVONIA, MICHIGAN 48154

June 27, 1980

Special Projects Grant
Federal Government
U.S.A.

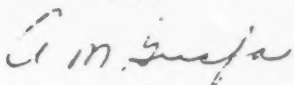
To Whom It May Concern:

Madonna College students matriculate for their clinical experiences at our facility. It is gratifying to have students who have sound knowledge of nursing principles, theory and their application. The quality of the nursing students is the result of untiring efforts of instructors who possess commendable qualities of leadership and instructorship.

We have been privileged to have in our employ nursing graduates from Madonna College and we are able to confirm their excellent preparation. Hired as Registered Nurses with a Baccalaureate Degree they have started as staff nurses, several have been promoted to supervisory positions and two are now holding the position of Associate Directors of Nursing.

It is with enthusiasm that we ask the continuation of the federal grant for Madonna College so that they may continue in their endeavors. My staff and I join in thanking you for any consideration that can be afforded Madonna College.

Sincerely,



Anne M. Gusia, M.A.; R.N.; C.N.A.A.
Director of Nursing Service



MADONNA COLLEGE
LYONIA, MI 48150

Non-profit Org.
U.S. Postage Paid
Bulk Mail
Permit 638
Lyonia, MI 48150

Madonna Newsletter

Nursing Department Granted Extension Of Accreditation

Extension of its accreditation has been received by Madonna's Department of Nursing, following an appraisal of the program by the National League for Nursing.

Review of the bachelor's degree program was completed in December following an on-campus visit by the League's representative, Sister Rosalie Klein, Dean of the College of Nursing, Marquette University, and Dr. Julia Quinng, Rush University College of Nursing, Chicago.

Prior to the on-campus visit, the Department of Nursing, under the leadership of the chairperson, Noreen O'Neill, completed a year-long self-study related to the curriculum, philosophy and graduates' performance.

In its evaluation, the League noted "intensive work done by the faculty in developing auto-tutorial approaches to nursing education," according to Chairperson O'Neill, and regarded as highly favorable the concept of self-paced learning.

In the past three years, Madonna has developed a new nursing curriculum in which the sophomore year of "family centered nursing" supports a program featuring care of the acutely ill in a hospital setting at the junior year and a senior year community and leadership emphasis in promotion of health and prevention of disease.

A new learning system features television, tapes, films, recordings.

(Cont. col. 3 back page)

Appendix J

Nursing Dept. (Cont.)

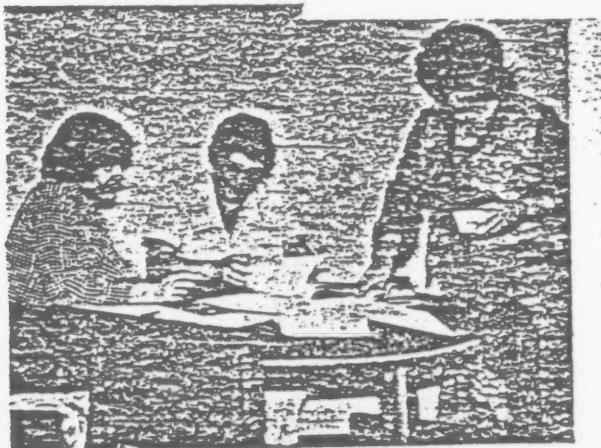
as well as printed materials to supplement clinical experiences, thereby helping students in the mastery of weekly self-paced learning modules.

A federal grant through the Department of Health, Education and Welfare aided the faculty development of this curriculum and establishment of the Health Instruction Center.

"Development of these learning strategies has enabled us to attract and keep high-caliber faculty," according to Chairperson O'Neill, "a fact which did not escape the attention of the NLN evaluators."

"Enthusiasm of nursing students for the modularized instruction and visual learning aids also influenced them," O'Neill said.

All sophomore and junior level courses are modularized and the faculty is presently completing senior level courses. In addition, the faculty is working with the computer center at Madonna to develop a computerized test item bank related to each module and its objectives.



Reviewing self-paced learning modules for nursing students at Madonna are (left to right) Janet Wolf, Senior Competency Coordinator; Carol Zenas, Fundamentals Instructor; and Noreen O'Neill, Chairperson of the Madonna Nursing Department. Tapes, films and television supplement

Michigan health educator

THE MAGAZINE FOR EVERYONE INTERESTED IN HEALTH

Why thousands die needlessly from...

HEART ATTACKS

**New look
in nursing
education**

**Protect yourself
against the
pesky mosquito**

**What you
don't know
can kill you**



How to fight for a life

AT MADONNA

Tomorrow's Nurses Prepare for Greater Health Service

by Dianne D. Kuhn

A certain excitement has come over the nursing department at Madonna College—found in students and faculty alike—attests department chairperson, Mrs. Noreen O'Neill, "We have changed our emphasis from teaching to learning," declared Mrs. O'Neill, "and in that way have become more accountable to the consumer."

Students at Madonna have become actively involved in gathering knowledge from a variety of sources. A nursing degree at Madonna is not limited to traditional "book-learning." Clinical experience, audio-visual aids, and close faculty-student relationships are all an integral part of the education program.

This "new look" in the nursing study comes with the aid of a federal grant and reflects the expanding role of the nurse.

Nursing faculty identified goals for each of the three years and then designed units of study incorporating those specific course competencies, outcome objectives, and appropriate learning experiences. They have stand-

arized the content of each nursing course. The method used is a modified autotutorial approach, adapted from the writings of Crystal Lange, RN, PhD, noted authority on self-paced learning.

Dr. Lange visited the Madonna College campus in June 1977 as consultant at a workshop session with the nursing department faculty, helping create multi-media modules and describing her approach to learning.

The autotutorial approach allows for individual mastery of work within a week's time limit. The nursing students' week typically begins on Tuesday and ends on the following Monday. A general assembly session allows for the introduction of the week's work. These one-hour sessions, with about 60 students in attendance, may employ a speaker, film, or other aid in introducing the material.

The balance of the week finds students in the health instruction center, viewing or reading media, or practicing a skill as part of the required activities. Or they may be in the clinical area with clients and instructors, exemplifying situations they have studied.

The next Monday provides an opportunity for the students to meet in smaller sessions with faculty members,

Dianne D. Kuhn is a feature writer with Madonna College.

Following course guide, nursing students at Madonna College develop problem-solving skills, using study carrel at health instruction center.

discussing inconsistencies uncovered, comparing clients' needs, or role-playing as an answer to specific questions raised by the week's experience. Members of the faculty agree that small sessions—generally on a ratio of 1:15—have led to more productive and satisfying student contact.

The mastery test is held early on Tuesday morning. Those students who do not satisfactorily complete the examination (80% mastery) know immediately through the use of the Scan-Tron test-scoring computer, and must repeat the work in conjunction with the next assigned unit of study.

Playing a key role in the changing nursing curriculum is the college's health instruction center. A portion of the federal grant has been used to relocate and expand the center, under the direction of Mrs. Patricia Vint, M.A.

The center has facilities for 40 students to master the weekly course material through viewing and listening devices.

One video room houses cordless broadcasting equipment with the capability of showing four different instructional units simultaneously, accommodating a maximum of 16 students.



Another room has study carrels with individual headphones, used with mobile cassette player/recorders or television receivers. The carrels are designed for using tapes and films together.

In addition to the audio-visual areas, the center houses a reading/conference room where students and faculty may read course material and discuss aspects of the study units.

An integral part of the center is a demonstration or practice lab. It is designed and equipped to give students a place for clinical simulations to practice manual skills before being super-

vised by the faculty.

The lab serves a double function, as it is used by both nursing and allied health students. The combined facilities of the health instruction center are open 75 hours per week.

From the point of view of the student, the result of the change in approach has been one of excitement. They are working with instructors during the week on specific course material with specific required outcomes.

They are no longer spoon-fed infor-

[please turn page]



Study carrels have individual headphones, equipped for cassette recorders and/or television receivers. Tapes and films may be run simultaneously.

mation; they are discovering answers for themselves. The nursing students are developing problem-solving skills.

The new format gives the faculty more time for personal contact with the students. It affords time for questions and the exploration of problems that may have been rushed over in the more traditional atmosphere of lecturer/note takers.

"There is a greater need than ever before for the services of the professional nurse in the community," explained Mrs. Janet Wolf, senior competency coordinator of the Madonna nursing faculty. "We put a greater emphasis on home care as the number of chronic illnesses increase, as we learn to care for the aged."

"The articulate professional nurse becomes the patient's advocate, helping him through a maze of community agencies and red tape. There is a need for expansion in the community nursing program as an answer to increased demand for nurses in non-traditional community services," Mrs. Wolf said.

The Madonna nursing faculty are expanding the community health content and experiences for the "Senior Distributive Nursing Year."

Operating in a logical sequence, the material will first be offered in the more standard lecture format. During the first year, self-paced learning will be applied to the more familiar material. Once senior-level content has been established and in use for a full academic year, it will be modularized for 1979-80.

Student input has played a significant role in the implementation of the new program at Madonna. The positive student reaction has been a good effectiveness gauge. Year-end competency exams administered by the faculty test the program's accountability while assessing student learning.

The exams are multi-faceted and include teacher-made objective exams over the entire year's content; NLN standardized achievement tests over nursing specialties; manual skill competencies as demonstrated in the practice lab; production of an assessment paper and care plan or process recording based on TV simulation.

"It is a demanding but exciting nursing education," concluded Mrs. O'Neill. □

Nurses learn to help alcoholics

The practicing nurse is in a key position to begin the process of change toward recovery in alcoholics.

That is the appraisal of Wayne Isbell, director of alcohol education program at Madonna College, Livonia, where student nurses are being trained to accurately assess the symptoms of the alcohol dependent person and intervene appropriately.

Isbell stresses that assessment is the predominant theme of the three alcoholism modules being integrated into the nursing curriculum.

The individual alcoholism modules are designed to conform to the auto-tutorial format used by the nursing department and are integrated at the proper time into the sequence of courses, complimenting the family-centered curriculum.

In the sophomore year, the alcohol education modules focus on taking the

drinking history of the family and learning to relate the influence of alcoholism on the family as a unit and the members as individuals. It is in this context that the students deal with the drinking woman as mother, and in turn, the effect of alcohol on the unborn fetus. The module also considers the relationship of alcohol to child and spouse abuse.

Junior level modules help the student assist the patient in the context of the acute care medical ward and develop a plan for alcoholism therapy after the crisis in the medical setting.

Nursing students in their senior year deal with the client in the community, as they emphasize the nurse's role in health promotion, disease prevention, and leadership. They learn to identify alcohol problems as they are associated with other sociological and family problems, and connect the alcoholic/family with community resources.

The goal of alcohol education at Madonna is to provide graduates with a basic knowledge of alcohol problems.

[continued on page 21]

Michigan health educator

THE MAGAZINE FOR EVERYONE INTERESTED IN HEALTH



✓ Dorothy Lendell of Ecorse, (left) assists fellow nursing students master basic skills required in nursing in practice lab at Madonna College, Livonia. Dorothy is a cooperative education placement as a faculty assistant, earning credit while supervision practice in blood pressure readings, bandaging, and other skills.

MADONNA COLLEGE
IVONIA, MICH. 48150

OCTOBER 1979

Teaching Modules Complete For Nursing Major

With the onset of the Fall Term at Madonna, the entire nursing major of 51 credits has been modularized, marking the final year in a three-year process.

The nursing faculty has been at work over the summer completing the senior-level courses, according to nursing department chairperson Noreen O'Neill.

The modularized program was developed with the aid of a federal grant, earmarking a change in the Madonna curriculum to reflect the expanding role of the nurse in today's society. Madonna's episodic, distributive, family-centered curriculum, which recently received continuing accreditation from the National League for Nursing, is the end result.

Reviewing the modularized approach, O'Neill termed it the best of two possible worlds, with accountability on the part of both the student and the faculty.

The Madonna nursing program incorporates the best of both self-paced instruction and the more traditional classroom techniques. Madonna nursing students study at their own pace within a given framework, while participating in small classroom sessions with individual faculty members.

Students know what is expected of them, and are given objectives on a weekly basis, as well as year-end objectives. O'Neill emphasized that 80 percent mastery is required in all courses, guaranteeing a high-calibre graduate from the Madonna nursing program.

O'Neill emphasized that the teaching modules are not a substitute for the classroom. The modules are study guides to other sources, reinforced by dialogue sessions with the faculty, she said, and may be looked upon as building blocks. The modules are arranged in a pre-determined sequence, with mastery on the primary level essential for successful continuation to junior and senior level courses.

The faculty has worked closely in coordinating material, O'Neill observed. Course content is reinforced from one year to the next, as the sophomore level feeds into the junior level, and the junior into the senior.

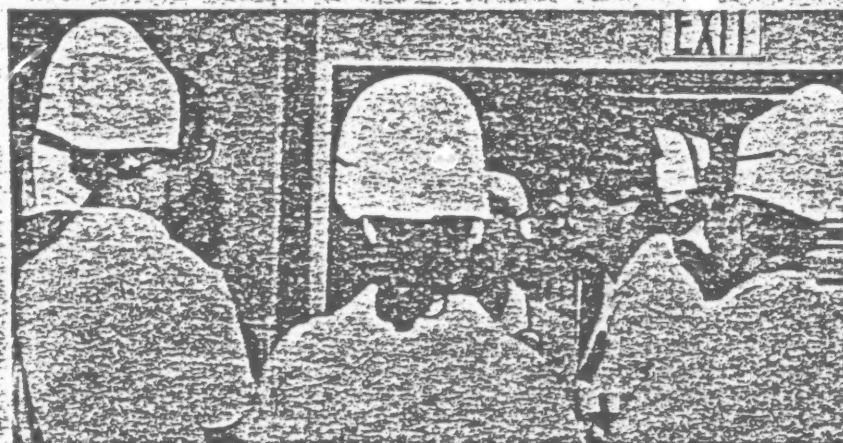
Progress is monitored by the National League for Nursing with year-end competency examinations.

Modules direct students to study materials, whether it be audio-visual aids, the practice lab in the Health Instruction Center, the Madonna library or clinical applications at given field sites.

O'Neill emphasized that the modularized approach, though specifying given competencies for individual courses, allows autonomy for the faculty, while providing

Appendix I, cont.

MADONNA NEWSLETTER



Kathleen Quigley, Instructor, Nursing Department, reviews procedures with nursing students in Clinical N365, at St. Mary Hospital, Livonia. The junior nursing students spend their clinicals in area hospitals, applying their knowledge in care of the acutely ill.

curriculum stability. Nursing faculty have considerable leeway within the structure of the program, yet content is constant.

There is an adjustment for students in the program, O'Neill recognized. Testing at the end of every week, as opposed to the more standard mid-term exams, is not an easy adjustment, she noted, but as the students adjust, they feel good about themselves.

The modules have been completed, O'Neill observed, but there is more work to be done. Modules will be continually updated, as ours is not a static science, she said.

To emphasize her point, O'Neill noted that the nursing curriculum will be adjusted to include modules on alcohol abuse this year, as part of Madonna's inter-disciplinary approach to alcohol education. Three courses will be added by the end of the year. The first course, at the sophomore family-centered level, will deal with family history and signs of alcohol abuse within the family. It will deal specifically with alcohol's effects on the unborn fetus and in the growth of child abuse.

Alcoholism modules in the junior level will deal with the detoxification and physiological problems of the alcoholic, while the community-orientated senior year will deal with community resources available to the alcoholic and his family.

The Ecorse Advertiser

AFFILIATED WITH THE RIVER ROUGE HERALD

OFFICIAL NEWSPAPER OF THE CITY OF ECORSE AND BOARD OF EDUCATION

Business Office
4198 W. Jefferson, Ecorse, Mich. 48229

Phone 928-1800

WEDNESDAY, APRIL 9, 1980

10 cents per copy

Puppets Promote Immunizations

"The puppets are coming help understand the concepts behind immunizations."

Cool, Kew, Bucky, Sally and the gang are all headed toward Ecorse schools in the near future. The puppets, which are similar to the world-renowned "Muppets," are part of an immunization teaching program that is to be initiated in the Ecorse School system.

Two senior nursing students from Madonna College, Karen Fraick of Redford Township and Dorothy Lendel, of Ecorse, have been diligently working on becoming refined puppeteers. The puppets will present various aspects of immunization (children's shots) to both the children and parents.

The state of Michigan has sent out a state-wide alert to check all children within the school system for up-to-date shots. Barbara Gates, Ecorse school nurse, is presently working on checking high school students. Children from the fourth to seventh grade are the next group to be reached. The puppet show is geared to attract these children and their parents.

The shows will be presented to each of the Ecorse elementary schools and Kennedy School. Parents are encouraged to attend. This program will

help understand the concepts behind immunizations. "I'm sure all of the parents have heard of diphtheria and polio, but do they really understand what these are?" states Karen Fraick. "The purpose of this project is to reach the entire school age population. Parents taking their children to receive the immunizations have the need to know what diseases they are preventing, they are preventing, presented to them in an interesting way — puppets."

The shows will be presented at School Two on April 15; School Three on April 16; Kennedy School on April 18; and Bunche School on April 22.

Each child viewing the puppet show will receive a coloring sheet attached to the immunization information pamphlet. One boy and one girl from each classroom will be awarded a blue ribbon for the best coloring sheet.

Dr. Richard A. Huston, superintendent of schools, said, "this is an excellent way of reaching the children and parents. In these days of advanced technology there is no reason to have children suffer unnecessarily when immunization against many childhood diseases is safe and readily available. We hope that you will take the time to participate in this program."

nurses work toward degree together

W Wednesday, March 21, 1979 —THE DETROIT NEWS—9-11

For Detroit couple, it's share and share alike

James and Iris Dean of Detroit are a husband-wife team which shares nursing careers and they're even classmates and studymates as they work for B.S. degrees in nursing together.

The couple, both registered nurses, are students at Madonna College in Livonia. They have two children.

Mrs. Dean works on the major surgical floor at North Detroit General Hospital in Hamtramck.

Her husband is an occupational health nurse with General Motors Cadillac Division.

The couple met while Mrs. Dean was in nursing school.

"I'm glad my wife persuaded me to go into nursing," Dean said. "In the past, nurses were so stereotyped that when I began nursing school I was relieved to find two other men in my class."

Dean conducts physical examinations, takes X-rays, gives hearing and vision tests and offers emergency care. He works in three medical departments on a rotating schedule: Cadillac Machine Plant in Livonia, Cadillac Stamping Plant and the Main Plant, both in Detroit.

During some of his free time, he trains plant

protection officers and safety engineers at Cadillac in cardiopulmonary resuscitation and first aid procedures.

He worked as an R.N. at Lakeside General Hospital in Detroit and Detroit General Hospital before going into occupational health.

"I would like to minor in occupational safety and health science at Madonna, since I am in contact with environmental situations," he said.

"I want to be knowledgeable about problems patients may come in contact with when working in a factory."

The Deans, both transfers from other colleges, will graduate in the summer of 1980. Dean plans to continue his studies, working toward an M.A. as an occupational health nurse practitioner.

The Madonna Nursing Program has undergone a major revision in recent years, with an emphasis on self-paced learning, incorporating an autotutorial approach to master course units.

The nursing department has an enrollment of 678 students, 400 of whom are registered nurses completing requirements for their B.S. degrees in nursing.



Sister Mary Humilltas coordinator of registered nurses at Madonna College, lends a hand to Iris and James Dean, a husband-and-wife team studying together to earn B.S. degrees in nursing.

QUESTDENT EVALUATION OF TEACHING STRATEGIES

8555 Stateville Road
Hazel Springs, MI 49740
April 30, 1980

Madonna College
36600 Schoolcraft Road
Livonia, MI 48150

Dear Director of Nursing,
I will be graduating from North
Central Michigan College in Petoskey
this June with an A.D.N. I would like
to go on and get a B.S.N. This desire is
shared by 10-15 of my classmates
and a similar number of R.N.'s currently
working at Northern Michigan Hospitals, Inc.
in Petoskey.

Does your school have an outreach
BSN program for ADN's? If so, please
send me information about it, including
options for testing out of classes, cost per
credit hour, etc. If enough people were
interested, would you consider offering the
courses in Petoskey?

Thank you for any help you can give me.

Yours,

Sandra L. Egentien



MADONNA COLLEGE

36600 SCHOOLCRAFT ROAD • LIVONIA, MICHIGAN 48150

May 12, 1980

Sandra L. Regentin
8555 Stutsmanville Road
Harbor Springs, Michigan 49740

Dear Ms. Regentin,

We received your letter recently and were very pleased to hear from you. Indeed, the very day it arrived the faculty and I were participating in a departmental colloquy and discussed how we might assist R.N.s in the Northern areas get their B.S.N.. Petoskey was expressly mentioned!

We have our 51 nursing credits totally modularized and this easily facilitates self-paced study. Your request and consortial efforts might bring our mutual desires to fruition. I say "consortial" because you will need to take general studies courses (including chemistry if you and your associates choose not to challenge/validate mastery by testing) to complete degree requirements.

We will continue to pursue this project and will keep you informed. Meanwhile, I am asking the Admission's office to send you brochures about our curriculum program.

Sincerely,

Noreen C. O'Neill
Chairperson Nursing Department

cc: Sr. Lauriana
Vice President for Development

NON/mm